

JOURNEY CLAIMS MANAGEMENT

**BEST TIME TO PROCURE:
UPON MATCHING WITH
GESTATIONAL CARRIER**



FINANCIAL & INSURANCE SOLUTIONS

We take the burden off of you to solve insurance and provider issues that can arise for maternity and/or newborn claims. Often, correcting errors months after bills and claims are processed will only delay financial completion of the journey. With Claims Management in place, you have the ART Risk team vetting all claims to ensure there is no unnecessary overpayment for medical care and help bring the financial portion of the journey to a timely close.

PERSONALIZED ASSISTANCE



Review of all insurance claims and provider bills to determine the correct payment needed from the IPs, Agency, or escrow account.

FINANCIAL CHECKS AND BALANCES



Routine communication with the insurance carrier(s) and providers to rectify denied claims, Coordination of Benefits issues, and incorrect coding. It is our responsibility to check for accuracy and confirm insurance is paying according to maximum plan benefits.

REPORT OF CLAIMS AND BILLS



Zero balances are requested from all providers and a final report is delivered to appropriate parties once all claims and bills are processed at the conclusion of the journey. You can rest assured there are no unpaid bills.

Over the course of a year, clients have been saved just shy of \$1.5M with ART Risk Solutions' claims management services.

1 866 433 4999

www.artrisksolutions.com

LIC# 0H38016



**CALL TODAY!
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Our Claims Management Specialists solve the issues that repeatedly fall on the Intended Parents and Gestational Carriers, and ensure insurance claims are accurately processed.

REPEATED INSURANCE PROBLEMS	OUR SOLUTIONS
INCORRECT CODING FROM PROVIDERS	 Communicate with all providers to correct coding issues and resubmit claims to insurance carrier.
HMO MEDICAL GROUP ISSUES	 Coordinate with GC, insurance, and providers to appoint the correct medical group.
EMERGENCIES PROCESSED AS OUT-OF-NETWORK	 Dispute the out-of-network claims and have claims reprocessed as in-network.
INSURANCE PAYMENTS NOT APPLIED TO PROVIDER BILLS	 Work with the providers to revise the bills to the correct amount due.
NEWBORN CLAIMS ON THE GC'S INSURANCE POLICY	 Work with the GC, insurance, and providers to remove claims and apply to the correct insurance plan.



Gestational Carrier Local Monitoring
\$500*
*\$1K for multiple cycles. Service finished upon completion of cycle.



+ Maternity Claims Management
\$2150**
Service completed 8-12 months post-birth (on average).



Newborn Claims Management
\$575
Service is complete upon discharge from the hospital and after the 1st well care visit.

+ Includes Premium Bill Monitoring service for (1) policy. This service requires the GC's participation, including access to her insurance portal(s) and timely submission of provider bills as received.

****The Maternity Claims Management fee is \$2150 for one policy. Claims Management is \$2650 for (2) policies and \$3150 for (3) policies.**

Cancellation Policies:

If confirmation of pregnancy has occurred and Maternity and/or Newborn Claims Management is cancelled due to miscarriage, ART Risk Solutions will evaluate refund/credit dependent on work rendered for current journey, less a \$250 administrative fee. There will be no refunds upon birth of child. Maternity Claims Management service is complete when agency contract ends with the Gestational Carrier and/or final Claims Management Report is submitted to Agency/Intended Parent(s).