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CASE STUDY R-2023-3-12

## **OUT OF NETWORK URGENT CARE**

Unlocking Revenue Potential: How Stratagem LLC Empowered Urgent Care to Recover Over \$500,000 in Underpaid Patient Visits through Effective Negotiations with Cigna, Blue Cross Blue Shield, Aetna, and TPA's Zelis, Multiplan, and HRGI

### **Abstract:**

This whitepaper outlines the remarkable success story of Stratagem LLC, a leading healthcare consulting firm, in assisting an urgent care client in recovering over \$500,000 in underpaid patient visits. By leveraging their expertise in negotiations and their deep understanding of the healthcare reimbursement landscape, Stratagem LLC navigated the complexities of working with major insurance providers, including Cigna, Blue Cross Blue Shield, Aetna, as well as third-party administrators (TPA's) Zelis, Multiplan, and HRGI. Furthermore, the whitepaper highlights how Stratagem LLC helped negotiate for double the amount offered by the TPAs, resulting in an additional payment of \$137,235.00 on "dead claims" that were previously rejected and written off. To learn more about Stratagem LLC and its services, please contact us at 302-932-5726 or visit our website at [www.stratagemrs.com](http://www.stratagemrs.com).

### **1. Introduction:**

In an increasingly competitive healthcare industry, maximizing revenue and optimizing reimbursement rates is crucial for the financial sustainability of healthcare providers. Stratagem LLC, a trusted name in healthcare consulting and recovery, specializes in assisting healthcare organizations to navigate complex reimbursement systems. In this whitepaper, we present a case study highlighting how Stratagem LLC supported an urgent care client in recovering over \$500,000 in underpaid patient visits through successful negotiations with major insurance providers, including Cigna, Blue Cross Blue Shield, Aetna, and TPAs Zelis, Multiplan, and HRGI. Additionally, the whitepaper showcases how Stratagem LLC helped secure an additional payment of \$137,235.00 on "dead claims" that were previously rejected and written off.

## 2. Background:

2.1 Stratagem LLC: Overview and Expertise - 26 Years of Experience

2.2 Urgent Care: Challenges and Opportunities

2.3 Healthcare Reimbursement Landscape: Understanding the Complexities

## 3. Methodology:

3.1 Assessing the Current State

3.2 Identifying Underpaid Patient Visits via FairHealth Sourcing

3.3 Developing a Negotiation Strategy utilizing strategic assets

3.4 Engaging with Insurance Providers and TPAs

## 4. Strategies for Successful Negotiations:

4.1 Leveraging Data Analytics and Insights

4.2 Crafting a Compelling Value Proposition

4.3 Effective Communication and Relationship Building

4.4 Addressing Denials and Appeals

4.5 Persistence and Tenacity in Pursuit of Fair Reimbursement

## 5. Results and Impact:

5.1 Total Recovery of Over \$500,000

5.2 Additional Payment of \$137,235.00 on "Dead Claims"

5.3 Enhanced Financial Stability for the Urgent Care Client

5.4 Strengthened Relationships with Insurance Providers and TPAs

5.5 Improved Revenue Cycle Management Practices

## 6. Conclusion:

The success of Stratagem LLC in helping its urgent care client recover over \$500,000 in underpaid patient visits through effective negotiations with Cigna, Blue Cross Blue Shield, Aetna, and TPAs Zelis, Multiplan, and HRGI underscores the importance of

strategic healthcare consulting. Additionally, securing an additional payment of \$137,235.00 on "dead claims" that were previously rejected and written off showcases the commitment and expertise of Stratagem LLC in advocating for their clients. By employing a data-driven approach, crafting compelling value propositions, and fostering strong relationships, Stratagem LLC delivered tangible results and unlocked.

### Why Stratagem Succeeds

- **Coding:** Healthcare services are coded using the Current Procedural Terminology (CPT) and International Classification of Diseases (ICD) codes. These codes ensure that the services provided are accurately described and billed to insurance companies. Stratagem utilizes databases and certified medical coders to ensure that CPT codes are bundled or non-bundled, do not conflict, and that your ICD-10 codes are properly supportive of the claim being made.
- **Claim Submission:** Once the services are coded, a claim is submitted to the insurance company for payment. Claims are submitted by our team through the clients clearinghouse and individual insurance company portals. We utilize an active spreadsheet database where our clients can see what's happening and how cash flow is looking.
- **Follow-up:** Insurance companies may deny claims for various reasons, including missing information or incorrect coding. The majority of the time major national health insurance companies are irrationally denying claims and hoping to take the "wait and see" approach with the physician or laboratory. Follow-up is necessary to ensure that claims are paid and any issues are resolved. Stratagem follows each claim from the cradle to the grave and ensures that our clients receive the maximum possible payment legally and swiftly.

In order to better serve our potential clients our experts need to have an in-depth review of the specific providers account we need the following information to start:

1. Clearinghouse Access (Avality, Change, Kareo, Advanced MD, Epic Etc.)
2. LIMS Access (Laboratory Information Management System)
3. Health Insurance Portal access for the main insurance carriers.
4. Previous A/R Reports and EOP/ EOB's for proof of current reimbursement rate per carrier.