Checking in on the Medicare Reference Pricer

Updates, new functionality, and how the MRPricer can help you

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Agenda

- About Milliman
- General Overview of MRPricer
- Batch Functionality
- EOB Functionality
- "As of" Pricing
- Integrations
- Demo
- What's Next?
- Q&A with Milliman Experts



About Milliman

4,800+ employees	\$1.5 Billion (US) revenue in 2023	68 offices across the globe
75 years of experience	Our healthcare clients include over 80% of the health plans in the nation	We certify more than 40% Part C bids and more than 60% Part D bids

About Milliman

Industry Leader

Milliman is the largest and most respected actuarial firm, consulting to most of the health insurers in the nation, state Medicaid programs, providers, health tech solutions, and federal, state, and local government.

Deep Healthcare Expertise

We are broadly acknowledged to be the leading consulting firm to healthcare risk takers and providers.

We have consulted on health issues to clients in more than 30 countries on six continents and have more actuaries who focus specifically on health issues than any other firm in the world.

Rigorous

Deeply embedded in our culture is a rigorous internal peer-review process on all client projects to ensure we deliver the best in advisory services. A second qualified Milliman consultant will review all work products.



MRPricer Overview





Medicare fee schedules

Milliman has a complete software solution for pricing claims to Medicare allowable fees and can price the claims that fail to adjudicate under the Medicare fee schedules.

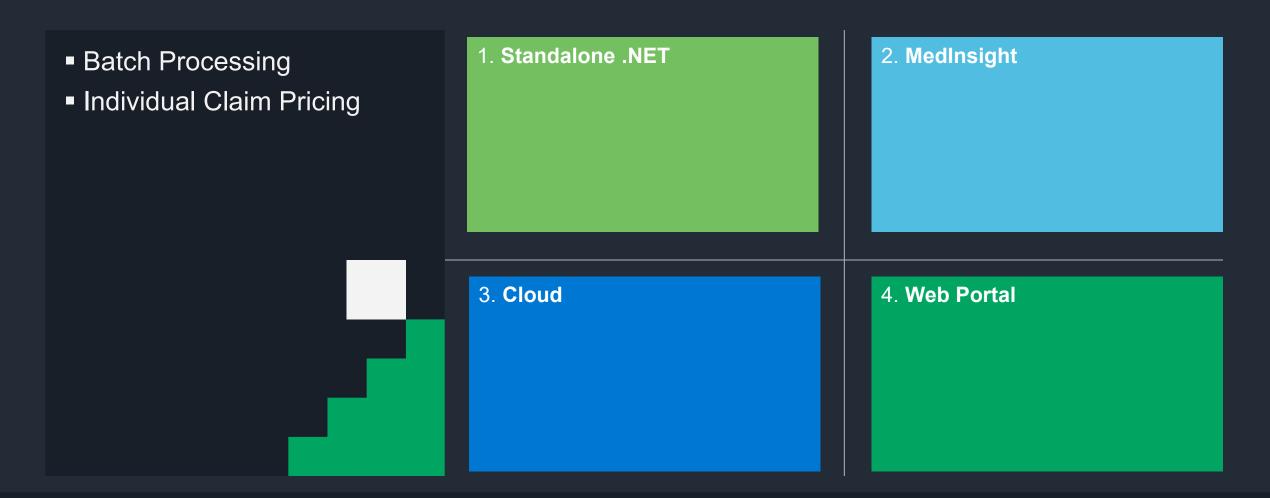
edules.

- Inpatient Prospective Payment System (IPPS)
- Skilled Nursing Facility (SNF) PPS
- Inpatient Psychiatric Facility (Psych PPS)
- Inpatient Rehabilitation Facility (Rehab PPS)
- Long-Term Care Hospitals (LTCH)
- Physician RBRVS
- Ambulance
- Clinical Lab
- Parenteral and Enteral (PEN)
- Durable Medical Equipment & Prosthetics (DME-POS)
- Anesthesia

- Outpatient Prospective Payment System (OPPS)
- Critical Access Hospital (CAH) interim payments
- Ambulatory Surgery Center (ASC)
- Dialysis Facility (ESRD) PPS
- Average Sales Price (ASP) drug fee schedule
- Maryland Waiver Hospitals
- Home Health



Medicare Pricing at Milliman





Key features



Quarterly Updates

We track the Federal register and the quarterly releases of each CMS Fee schedule and provides timely updates.



Complete Payment Adjustments

Replicates each Medicare payment adjustment and is tested using Milliman's detailed Medicare claim feeds from CMS.



Detailed Build-Up

Generates claim-level reports detailing the build-up of all payment amounts.



Include or exclude payment components such as indirect medical education (IME), graduate medical education (GME), and organ acquisition payments.



MS-DRG and APC Groupers

Software includes integrated MS-DRG and APC Groupers.



Provider-Specific Adjustments

Includes providers-specific adjustments such as value-based purchasing adjustments, and quality reporting adjustments.





Batch Functionality





What is Batch?

Upgrade to Single Claim Pricing

- Ability to upload a file of claims to be priced automatically
- Uploaded via a GUI Dashboard or programmatically through an API

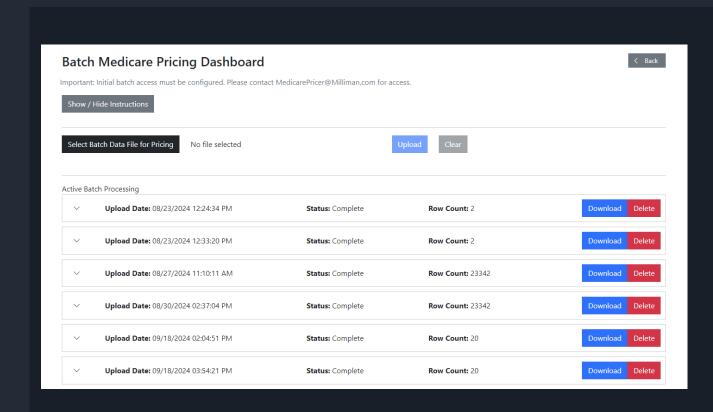
Why you should care...

- Effectively perform operations like retrospective analysis
- Automate your day-to-day Medicare pricing operations for large or small organizations





Observability and Performance



Observability

Progress on a batch is provided via an API or through a Dashboard

Performance

Whether the batch is small (10-100 claims or large (1000-million+ claims) the process is quick and reliable

 Built on microservices using serverless cloud technologies



Not Another File Format

Standard Milliman File Formats

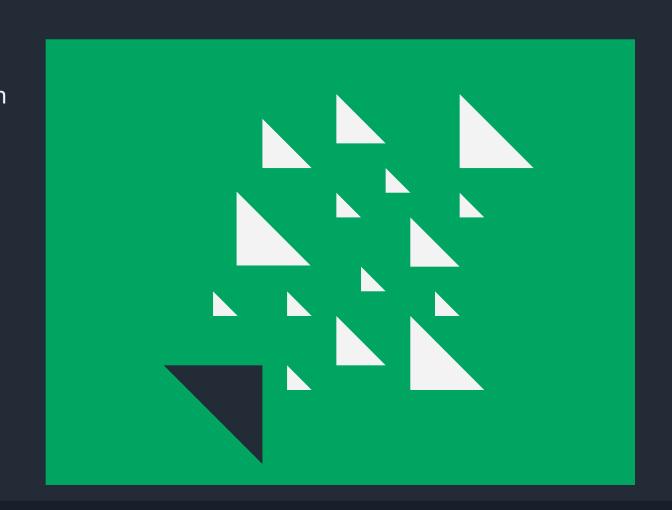
Input and Output file formats match other Milliman products

Input Format is Flexible

Include any collection of claims from numerous years

Output Format is Customizable

- Output file can be customized based on your needs
- Receive more detail or less detail





EOB Functionality





Generating Custom Documents



Please address benefit questions to

Explanation of Benefit ***THIS IS NOT A BILL***

Customer Service 877-278-4668

Website

www.medicalbillrepricer.com

THIS STATEMENT REPRESENTS THE CLAIM ACTIVITY PROCESSED FOR YOU AND YOUR DEPENDENTS. IT REQUIRES NO ACTION FROM

John Smith 1111 Anytown, WA



CLAIM ID PLAN LEVEL PROCESSED DATE 2024-111208-1FISW Great 2024-11-12

PROVIDER INFORMATION

PATIENT INFORMATION

John Smith PATIENT NAME: abc123 MEMBER ID:

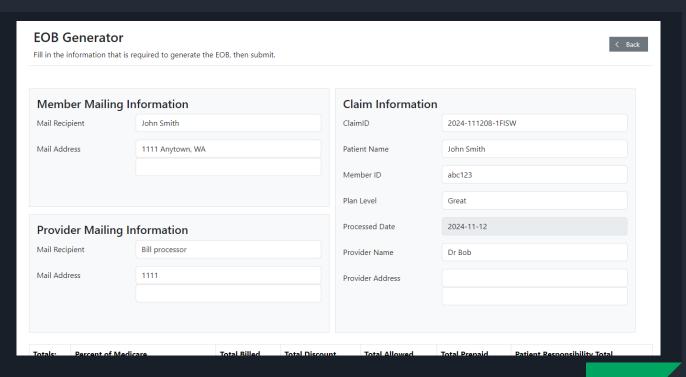
lotais:	lotal Billed		Iotal Discount	lotal Allowed	Iotal Prepaid		Patient Responsibility Total:			
	\$4000.00		\$2965.44	\$1034.57	\$0.00		\$1034.60			
DATE OF SERVICE	SERVICE CODE	SERVICE D	DESCRIPTION		QTY	BILLED AMOUNT	DISCOUNT AMOUNT	ALLOWED AMOUNT	PRE-PAY	PATIENT RESPONSIBILITY
01/01/2024	97110	Therapeut	tic exercises		1	\$500.00	\$454.52	\$45.48	\$0.00	\$45.48
01/02/2024	97110	Therapeut	tic exercises		4	\$500.00	\$352.20	\$147.80	\$0.00	\$147.80
01/02/2024	97110	Therapeut	tic exercises		4	\$500.00	\$363.57	\$136.43	\$0.00	\$136.43
01/03/2024	97110	Therapeut	tic exercises		4	\$500.00	\$352.20	\$147.80	\$0.00	\$147.80
01/01/2024	97110	Therapeut	tic exercises		4	\$500.00	\$363.57	\$136.43	\$0.00	\$136.43
01/01/2024	97110	Therapeut	tic exercises		4	\$500.00	\$363.57	\$136.43	\$0.00	\$136.43
01/03/2024	97110	Therapeut	tic exercises		4	\$500.00	\$363.57	\$136.43	\$0.00	\$136.43
01/11/2024	97110	Therapeut	tic exercises		4	\$500.00	\$352.20	\$147.80	\$0.00	\$147.80

- Streamline creation of Explanation of Benefits / Explanation of Payment (EOB/EOP) or other claim documentation
- Customize with your organization's branding and requirements
- Real-time integration with claims pricing results



Benefits and Key Features

- Provide your own Word or PDF template, or adjust an existing template with your logos and branding
- Customize the fields and information shown in the document to fit your audience and requirements
- Reduce staff time to generate documentation
- Improve consistency and accuracy



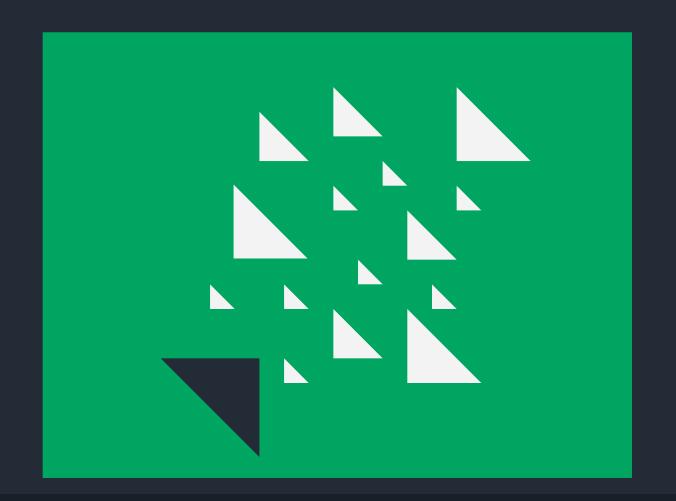


Use Case - EOB Functionality

Mayo Street Ventures

Janis Tucker

- Explain Mayo Street Ventures' use case for the EOB feature.
- How did this solution solve your problems?



Pricing Claims "As of" a Past Date



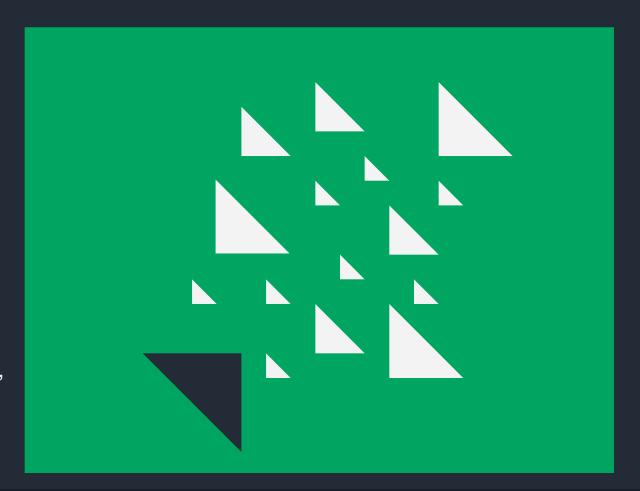


As of Date Pricing: Background

CMS regularly releases retroactive payment information

Example:

- On December 14, 2024 CMS releases Provider Specific File pricing data for Main Street Hospital Effective January 1, 2025
- On February 1, 2025 CMS releases updated factors for Main Street Hospital Effective January 1, 2025



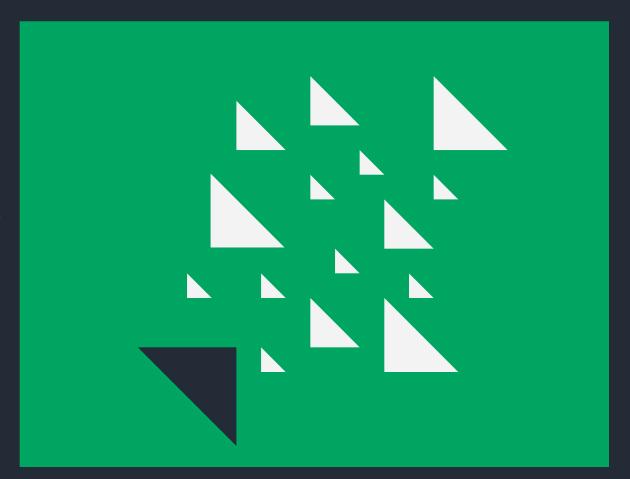


As of Date Pricing: Background

As-of Pricing allows you to replicate pricing using the latest information available on a prior data

Example:

- Entering an As-of date of January 10, 2025 will use the December 14th CMS information for Main Street Hospital for a claim incurred January 1st.
- Entering a February 14, 2025 As-of date will use the February 1st CMS information



Integration





Interoperability is Essential for Automation

MRP can integrate with existing applications or processes

- Web API
 - JSON over HTTPS
 - Synchronous and asynchronous available based on needs
 - Asynchronous pricing can accept multiple claims at once
 - Universal inputs with the same format for all pricers and automatic selection of pricers
- EDI
 - X12 formats 837P and 837I
 - Returns X12, 837 repricing results and 999 acknowledgement message



Demo





What's Next?





What's Next

Feature	Status/Timing
Add FQHC Pricer	December 2024
Add Pricer Selection in Portal	December 2024
Automated CMS data updates	2025 Q1
CARC/RARC integration	2025Q1
Support Medicaid pricing	For select states
Claim system integration	Additional claims systems integrated in support of new clients
Increase system pricing speed for professional and outpatient facility claims.	2025Q2



Q&A





Q&A

We are happy to answer your questions now with the Q&A chat within Zoom, but if you would rather follow up with send us an email, please feel free to contact any of us below.

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Thank you