



**ERISA  
RECOVERY**  
Optimizing Healthcare Revenue

# CASE STUDY

## PREVIEW

In today's healthcare climate, hospitals need to find new sources of revenue. Medicare and Medicaid reimbursements alone is not enough. Most profits that are to be gained must come from patients who have commercial insurance.

Unfortunately, commercial payers add to this problem by denying a large portion of claims, causing providers to write-off desperately needed revenue. Re-appealing through ordinary methods has limited success and often serves only to delay the write-off process. This is time consuming for minimal benefit.

## AREA OF OPPORTUNITY

Hospitals need to identify a new revenue stream to help infuse the hospital with additional cash. With a large amount of written-off claims collecting dust, it only seems logical to target this pool of lost revenue.

## STRICT REQUIREMENTS WERE PUT IN PLACE

- No Out Of Pocket Expenses
- No Interruption Of the Current Recovery Process
- No Addition To The Heavy Workloads

### ERISA / AGED RECOVERY:

- 12 Months - \$1,434,408
- 17 Months - \$2,720,462
- 22 Months - \$4,899,792
- 25 Months - \$6,551,887
- \$7.7M Under Appeal**
- \$14.8M Currently Being Vetted**

These revenues are based off quarterly reports provided by our client. With our next new report coming this April ERISA Recovery anticipates steady revenue growth moving forward!



Target Written-Off Claims



Strict Adherence to ERISA



Contingency Based - NO RISK

# SOLUTION



## ERISA Recovery (ER) and the Employee Retirement Income Security Act (ERISA).

ER applies ERISA provision only to those commercial claims which have been written-off going back to 2003.

Most hospitals do not have the resources or expertise to file a valid federal ERISA appeal – it's too complicated and too labor intensive. ERISA can be leveraged for certain commercial claims, particularly when reimbursement is less than expected and all appeals avenues were unsuccessful.



Traditional hospital appeals are based on the contract between the provider and their managed care contract.



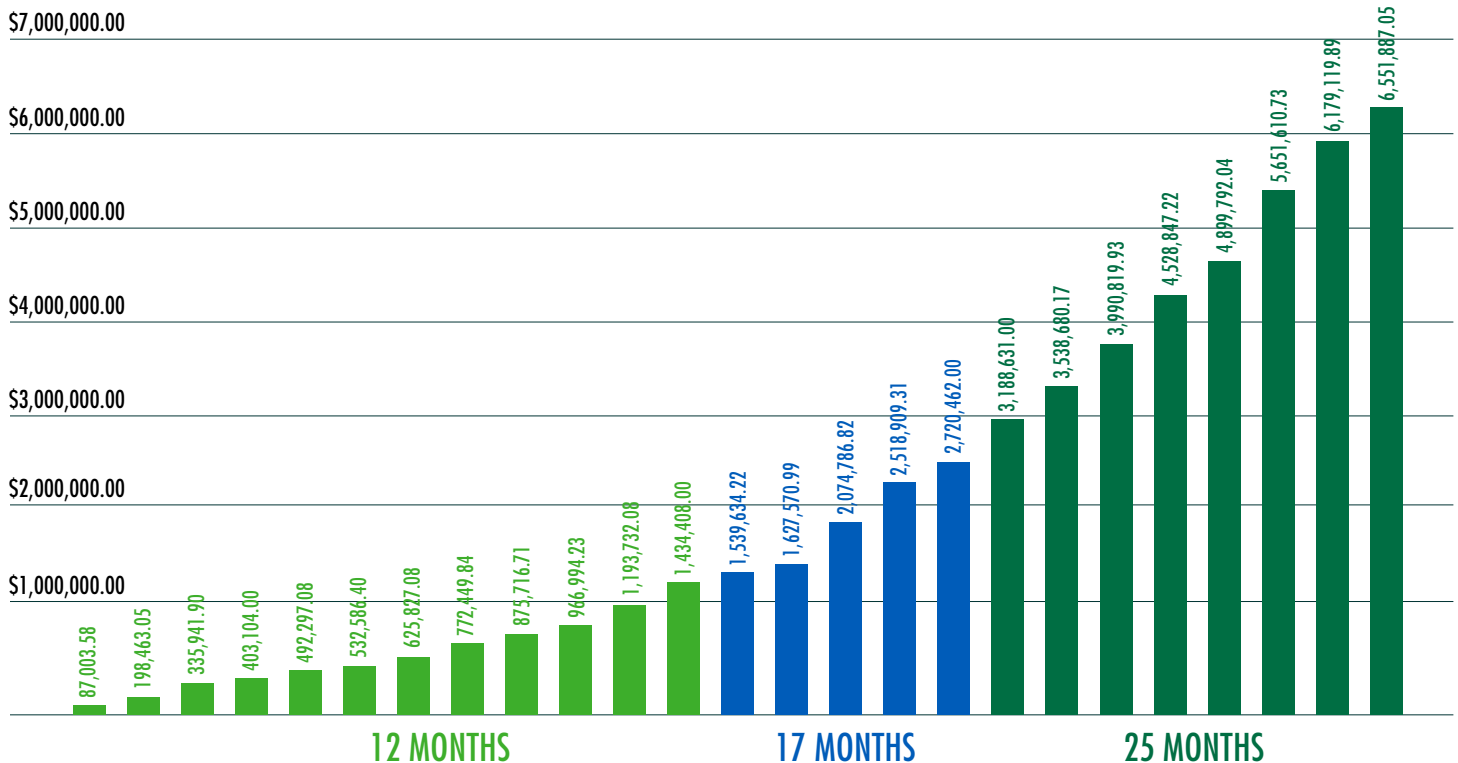
ERISA allows for appeals to the carrier as well as the employer that sponsors the plan.



# WHY ERISA

Less than .005% of ALL appeals are appealed through the ERISA process.

A valid and compliant ERISA appeal will ensure maximum benefit reimbursement or recovery for denied benefit claims in accordance with the United States Supreme Court unanimous ruling in Aetna v. Davila (2004).



## WHY ERISA – CONTINUED



ERISA Recovery understands the difference. We are Experts in the ERISA appeals process and can assist you in recouping a good portion of the revenue that you have had written-off. PPACA fully adopted all ERISA rules and regulations.

System access with this 13 hospital client was granted including our first report in September 2016. To date, as indicated by 8-quarterly reports, ER was able to recoup revenues of over \$6.5M. Currently there is an additional \$7.7M in appeals and \$14.8M currently being vetted through our proprietary ERISA appeals process. With consistent reporting, revenues will continue to increase. ER uses an extraordinarily analytical approach and machine learning to examine reports that can produce the most revenues for our client. The only lift we ask from our clients is to generate reports. ER does all the heavy lifting!

