

Recover Significant Savings

by integrating NICU-focused utilization management with specialized payment integrity



ProgenyHealth's specialized team reviews and verifies that NICU claims submitted to the health plan accurately reflect the authorized and delivered care.

ProgenyHealth's **NICU Payment Validation & Assurance** (PVA) service delivers industry-leading turnaround times and cost-saving accuracy through our tightly integrated approach to NICU Care Management. With direct access to our proprietary medical management platform Baby Trax®, our NICU-experienced certified medical coders (nurses) go beyond machine-driven programs to uncover discrepancies not captured by typical payment integrity services.

"ProgenyHealth captured savings for us by ensuring that billed days, services, and coding matched the authorized levels of care and were supported by clinical indicators."

Health Plan CFO

How NICU Payment Validation & Assurance Works:

The PVA team reviews claims for ProgenyHealth-managed NICU cases to verify that room and board revenue codes and units reflect clinical authorizations.

Data collection starts during the inpatient admission to create a detailed record of the stay. We match each claim with clinical information directly from Baby Trax to validate coding assignments and avoid the need to request an entire medical record for review. This reduces the providers' administrative burden.

Ensure NICU Claims Accuracy

Length of Stay

We verify the number of days billed versus days authorized.

Level of Care

We assure that billed charges match the clinical levels of care authorized.

Diagnostics Severity

We review the severity of illness with 300+ targeted codes to ensure accurate coding.



ProgenyHealth's NICU Payment Validation & Assurance Service:

Conducts a curated manual claims review

Unlike other payment integrity vendors who use automated logic exclusively, our specialist approach captures the nuances of NICU clinical care.

Reviews 100% of NICU claims to maximize savings

We capture unauthorized billed days, levels of care, gaps between physician documentation and coder interpretation, and unnecessary waste or abuse.

Works with existing payment integrity programs

We can review billing after existing payment integrity programs and still deliver savings across reimbursement methodologies.

Costs nothing unless we deliver savings

Our payment is contingent on identified or realized shared savings – no findings means no cost to you.



Savings Example*

40-week GA infant, C-section with meconium:

- Poor perfusion, respiratory distress requiring NC O2 initially then weaned to RA, IVF, and on full PO feeds by DOL 2
- Treated for possible sepsis with antibiotics for 2 days, blood cultures **negative**
- Length of Stay: **3 days**

Pre-Review

APR DRG: 636-3 Rate: \$16,013

Post-Review

APR DRG: 636-2 Rate: \$9,098

Recovered Amount . . . \$6,915

76%
Overpayment

ProgenyHealth's PVA service pays for itself with a 3:1 ROI

Percentage of referred claims

Approximately 80% of all claims have some degree of inaccuracy. We find that **20%–30%** of claims reflect differences that result in savings.

Average savings per claim

We identify savings of \$7,000 to \$10,000 on average per finding, representing **\$1,000 to \$3,000 per member**.

Commercial & Medicaid

We uncover similar savings from **both lines of business** and across any reimbursement methodology, including DRG case rates, per diem fees, percent of charges, and more.

Lower your costs by ensuring claims accuracy

Learn more about ProgenyHealth's Payment Validation and Assurance at progenyhealth.com or call **610-832-2001, press 5**

