

HOW IT WORKS Pivot Health Short Term Medical

Reference Based Pricing



Member Education

Referenced based pricing occurs when a provider submits a claim to the administrator. The administrator then pays the provider based on Medicare allowable amounts. Each member's ID card contains the total amount of reimbursement the provider will receive based on this scale. The fulfillment materials include instructions on how to file a claim and the basis of how claims are paid.

Open Access

Members choose providers that best fit their needs. There is simply one benefit level for all providers, unlike a PPO plan where there are separate in-network and out-of-network benefit levels. Pivot reimburses medical providers based on a percentage above Medicare allowable amounts, paying up to 150% of Medicare allowable amount for medical facilities and 125% of Medicare allowable amount for physician claims.



Claims Process

Providers submit their claims to Allied National, Pivot Health's plan administrator, for processing. When bills are received, they are repriced according to the percentages of Medicare allowed amounts, based on the Medicare fee schedule. Payment is made to the provider based on this amount and the reduction is shown as a discount by the provider.



Allied Client Services

If a provider wishes to review and discuss the allowed amount or initially objects to the reimbursement amount, the provider can contact the Benefit Verification line at **866-323-2985**. In addition, providers are contacted proactively if asked by insured, to confirm that they are accepting the reimbursements and not shifting costs to members.



No Balance Bill Guarantee

The Pivot Health short term medical claims reimbursement system is set up to guarantee that no member will be responsible for a balance bill due to the discount taken for charges above the medicare reference pricing amount.* If a provider bills the member for any portion of the discount, the member may refer that bill to Allied who will initiate the negotiation process. The member needs to send a copy of the bill to balancebilling@alliednational.com



Members win with Pivot Health's Reference Based Pricing 3 times:

- $\begin{tabular}{ll} 1 Premiums are typically lower \\ than traditional PPO plans \\ \end{tabular}$
- 2 Discounts for claims on average are higher
- 3 No balance bill guarantee