Contract Analysis

Understand the bottom line, before you sign

We’ve all heard the saying “look before you leap.” In the business world, there’s nothing more important than thoroughly examining a contract, and understanding all its ramifications, before signing it.

Because you don’t have a crystal ball to predict how a change in any of the hundreds of variables in third-party contracts will affect reimbursement for the precise mix of services you deliver, you need Contract Analysis. This solution tells you exactly how proposed contracts with payers will affect your revenue — before you sign on the dotted line.

How we do it

Contract Analysis seamlessly integrates with our Contract Manager solution to model contract performance. Using Contract Manager’s claims valuation engine and your detailed contracts and claims history, you can accurately apply proposed contract terms to your organization’s services offerings and get a detailed, customized impact analysis.

Contract Analysis prepares you with the information you need to evaluate proposed payer contracts before you commit to terms that could put your organization at risk.

What you get

• Accurately assess the impacts of each contract
  Precisely model revenues down to how much each individual specialty, provider or service could gain or lose

• Identify hidden “takeaways”
  Spot costly reimbursement rule changes so you can negotiate them out of your contract

• Model the financial impact of alternate contracts
  Run “what if” scenarios to assess the impact of carve-outs, alternate fee schedules and modifier rules and different subsets of your claim file

• Negotiate better-performing contracts
  Target your bargaining strategy on the factors that affect your reimbursement most

• Find out what the payer proposal doesn’t tell you
  Identify what’s missing and go back to the payer for more details

• Rank your payers
  Compare each contract to the baseline of your choice, e.g., a percent of Medicare or billed charges

Works well with

When combined with Contract Manager and Payer Alerts, you improve reimbursement workflow by receiving daily updates about policy and procedure changes specific to your payers and specialties. Accurate appeals and fewer denials mean less staff time wasted re-filing and appealing claims.