



Transforming TPA Operations to Optimize Out-of-Network Claims and Compliance

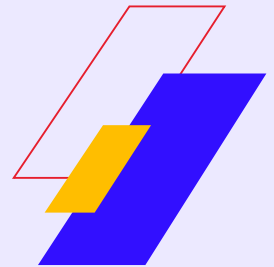
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Managing out-of-network (OON) claims is no small task. Third-party administrators (TPAs) often shoulder a heavy administrative burden, juggling compliance with the No Surprises Act (NSA) and varying state regulations – all while striving to maintain satisfaction for both members and providers.

The growing complexity of OON claims leaves TPAs stretched thin, especially when resources are already limited. Despite these challenges, driving savings for self-funded health plans remains a top priority.

That's where the right partner can make all the difference. By leveraging a comprehensive pricing solution, TPAs can streamline OON claims management, ensure regulatory compliance and unlock meaningful savings for their employer groups. It's a solution that transforms challenges into opportunities.



The role of a technology and services partner

Navigating OON claims requires more than technology – it demands a partner that integrates seamlessly into existing systems while delivering rapid, impactful results.

Integrations play a crucial role in enhancing the efficiency of the healthcare journey. Organizations can streamline processes, reduce administrative burdens and improve service delivery by ensuring seamless connections between adjudication platforms. Prioritizing integrations enables a more cohesive experience for all stakeholders involved in healthcare, ultimately leading to better outcomes and more efficient operations.

“What that means to the TPA is that implementation is not two years. It’s 60 to 90 days.”

– Bryan Russo, Senior Vice President of Sales at Zelis.

A tailored approach is essential to meet the unique needs of each TPA. The goal is to align tools and skills with a TPA’s specific strategy to manage their claims effectively. This level of adaptability ensures that the enterprise solution not only integrates smoothly into current operations but also scales as TPAs grow and encounter new challenges.

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Claims data is invaluable, but its volume is staggering. That’s why TPAs need a partner with technology and human experts to analyze that data, discover inaccuracies, negotiate with providers and ensure efficient, accurate billing.



With the No Surprises Act (NSA) and state regulations reshaping the OON landscape, TPAs face mounting pressure to ensure compliance and manage increasing complexity. Federal disputes and ongoing lawsuits further highlight the need for scalable tools that evolve with changing laws. Failure to keep pace exposes TPAs to significant risks.

TPAs need scalable billing tools to keep up with the evolving regulatory landscape at the federal and state levels. A failure to keep pace with these changes exposes TPAs to costly risks.

A successful partnership means managing OON claims efficiently and achieving meaningful outcomes: cost savings, improved satisfaction for members and providers and confidence in regulatory compliance. It’s a more innovative way to navigate the complexities of the OON space and stay ahead in a rapidly changing environment.

The benefits for TPAs

A technology and services provider with experience in the OON space offers more than just tools – it provides valuable guidance and support. **But what does that partnership mean for TPAs?**

Cost efficiency and revenue growth

OON claims savings are just the foundation of what a true partner can deliver.

"Implementing a range of solutions enhances operational efficiency and significantly increases the savings and revenue delivered to employer groups and TPAs," said Russo. "By leveraging a comprehensive suite of integrated solutions, organizations can maximize cost containment, optimize claims processes and achieve greater financial outcomes for all stakeholders involved."

What can those savings look like?

The answer is in the claims data.

An effective partner should conduct an impact analysis to demonstrate the value it can bring, showing how much more savings are achievable.

"Every impact analysis we conduct includes a detailed breakdown of claims cost savings, provider and facility insights, and NSA applicability—customized to align with client needs."

— Bryan Russo,, Senior Vice President of Sales at Zelis.



When TPAs work with the right partner, they bring much-needed transparency to the OON billing process.

For many TPAs, OON claims are the first place they look to vendors for help. As a baseline, a trusted vendor partner can manage the challenges of OON claims and the shifting regulatory landscape.

From there, the partnership can evolve to deliver even greater value. A technology and services partner can unlock additional savings across all claims by leveraging payment integrity tools and advanced negotiation strategies. It can also build and optimize competitive networks while engaging members and guiding them toward affordable, high-quality care.

Enterprise technology like this empowers TPAs to deliver the healthcare cost efficiency employer groups demand. These savings strengthen relationships with employer groups and increase a TPA's competitive edge, which in turn drives greater revenue and grows the business.

Improved provider and member relationships

Provider and patient relationships are essential components of success. On the provider side, billing departments often face significant challenges with OON claims. They have to chase payments from patients and handle disputes on the insurance side. The result can be a substantial administrative burden and cost.

"The time spent on disputes, dealing with TPAs or pursuing members, only adds to costs."

— Michael Chang, Vice President of Negotiations and Claims Management, Zelis.

A technology and services partner can help TPAs build stronger provider relationships by alleviating that burden. The right partner can engage with members to help them navigate the OON space and their financial responsibility.

That connection saves providers time and, ultimately, improves cash flow by facilitating efficient, streamlined patient payments. When TPAs work with the right partner, they bring much-needed transparency to the OON billing process. Transparency is vital in building trust and satisfaction with healthcare providers. The right partner can give TPAs tools to reduce provider abrasion.

That same transparency and support play an important role in strengthening member relationships. [A 2023 survey found](#) that less than half of healthcare consumers are satisfied with their health insurance provider. That dissatisfaction feeds member abrasion, which can impact all healthcare stakeholders.



TPAs can lean on an enterprise product that addresses and minimizes that abrasion.

A partner can facilitate the creation of networks, directing members to the most suitable providers and helping patients receive high-quality care at competitive prices. Additionally, having a partner specializing in patient communication and engagement can assist patients in comprehending and managing the complexities associated with OON claims.

Members need to recognize that they have used OON services and understand the implications and protections available to them. That kind of proactive communication alleviates the administrative burden for TPAs and the providers in their networks. Not only can a service partner engage health plan members to provide education on their OON health bills, but in some instances, they can negotiate to reduce the out-of-pocket amount due.

Good customer service and tools designed to help patients find the most affordable care are two of the most effective ways to improve member satisfaction, according to the same 2023 survey. Finding the right partner can help TPAs embrace those impactful solutions to member dissatisfaction. An integrated approach helps drive down member costs through billing investigation and expert negotiation.

“A track record of helping members mitigate large out-of-network bills only continues to grow and strengthen their trust. It provides members better customer service, experience and outcome overall.”

– Hilary Chapman, Voice of Client Director, Zelis.

Competitive advantage

The market for TPAs is growing, but competition in the insurance space is fierce. To thrive, TPAs must differentiate themselves from one another and regional and national health plans.

So, how can TPAs best serve their employer groups and stand out in this crowded environment?

TPAs can use a comprehensive solution provider to capture those savings in both the in-network and OON spaces. Claims analysis, negotiation and billing provided by AI-powered tools and human experts ensure that no potential savings go unrealized.

A solutions provider can also deliver member engagement services that help consumers find the best care at the most affordable price. When members go OON, that partner guides them through their financial responsibility and may negotiate a lower bill on their behalf.

Providing this level of service to employer groups enhances loyalty and retention. And when TPAs help reduce healthcare costs for an employer, they also strengthen the partnership, increasing the likelihood of renewal and long-term collaboration.

“This positions TPAs more competitively in the marketplace, enabling them to effectively compete with the national and regional plans and other TPAs,” Russo emphasized.

Finding a transformative partner

Navigating OON claims isn't just about managing complexity but finding opportunities in the chaos.

To thrive, TPAs must go beyond managing the intricacies of OON billing. It's essential to enhance operational efficiency, reduce costs for your employer groups and build strong, lasting relationships with providers and members. A technology and services partner with an end-to-end, scalable enterprise product can help you achieve these goals while securing a competitive edge in the market.

And OON support is just the beginning of what a comprehensive solution provider can offer. By partnering with the right technology and services provider, TPAs can unlock additional savings for their employer groups, boost retention and drive revenue growth.

"TPAs can rely on our proven scale, extensive experience and robust capacity to manage the process efficiently and effectively. A comprehensive approach ensures that every aspect of claims management is handled with precision, allowing TPAs to focus on delivering value to their employer groups and members."

– Carrie Gardner, Vice President of Product, Out-of-Network, Zelis.

Conclusion

Transforming TPA operations to optimize OON claims management is essential in today's complex healthcare landscape. As TPAs face mounting challenges from regulatory pressures and the intricacies of NSA, partnering with the right technology and services provider becomes more critical than ever. A strategic partner offers advanced tools and insights and provides the necessary guidance and support to navigate compliance and improve operational efficiency.

By leveraging data analytics, seamless integrations and tailored solutions, TPAs can drive significant cost savings, enhance provider and member satisfaction and ensure ongoing regulatory compliance. The potential for increased revenue and improved outcomes lies in the hands of those who choose to collaborate with experienced partners capable of responding to both current needs and future challenges.

Ultimately, embracing this transformation is not just about managing OON claims – it's about seizing opportunities to evolve in a rapidly changing environment, achieve sustainable growth and foster a more effective healthcare system for all stakeholders involved. As TPAs take these crucial steps forward, they position themselves to thrive amidst complexity and uncertainty, creating consistent value for their employer groups and members.

ABOUT ZELIS

Zelis is modernizing the healthcare financial experience by providing a connected platform that bridges the gaps and aligns interests across payers, providers, and healthcare consumers. This platform serves more than 750 payers, including the top 5 national health plans, BCBS insurers, regional health plans, TPAs and self-insured employers, and millions of healthcare providers and consumers. Zelis sees across the system to identify, optimize, and solve problems holistically with technology built by healthcare experts – driving real, measurable results for clients. Learn more at [Zelis.com](https://zelis.com) and [follow us on LinkedIn](#) to get the latest news.



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