

A black and white photograph of two healthcare professionals, a man and a woman, both wearing white lab coats and surgical masks. They are standing outdoors in front of a building with large windows. The man is holding a tablet and pointing at the screen, while the woman looks on. Both have stethoscopes around their necks. The image is partially overlaid by a dark blue banner on the left side.

Capabilities Overview

Helping employers manage all aspects of outpatient dialysis claims. From improved member experience through early intervention & case management to proprietary methodologies to reduce employer claim costs.



Program Capabilities Overview

Escalating Dialysis Costs

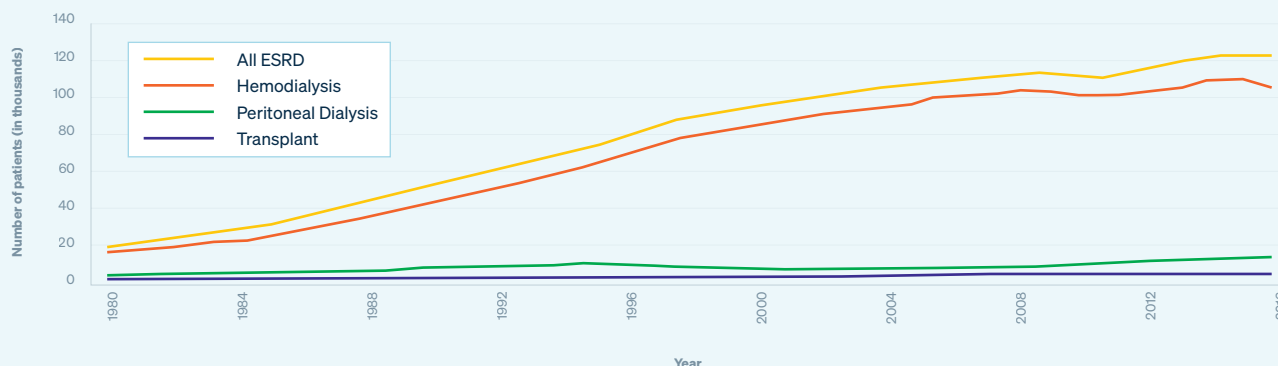
The prices charged by the leading outpatient dialysis providers continue to rise. The challenge for employers and administrators is to protect plan assets without sacrificing quality care for the patients that need it. Due to the highly concentrated makeup of the dialysis provider market, most PPO networks struggle to negotiate agreements that can provide meaningful savings to employer health plans.

Growing Incidence

According to the US Department of Health and Human Services, Centers for Disease Control and Prevention, more than 15% of U.S. adults, over 37 million people, are estimated to have Chronic Kidney Disease (CKD)¹. The vast majority with CKD, 9 out of 10, don't even know they have it. Additionally, close to 1 in 3 adults with diabetes and 1 in 5 adults with high blood pressure have CKD.

According to USRDS data², each year more than 120,000 Americans are diagnosed with end-stage renal disease (ESRD) requiring dialysis or a transplant to survive. On average, there will be more than 380 new ESRD diagnoses annually for every 1 million U.S. citizens. This number increases to more than 1,000 new cases per million for people between 65 and 70 years old.

Trends in the Annual Number of ESRD Incident Cases, by Modality, in the US Population, 1980-2017



Data Source: Reference Table D.1 and special analysis of USRDS ESRD Database. Persons with "Uncertain Dialysis" were included in the "All ESRD" total, but are not represented separately. Abbreviation: ESRD, end-stage renal disease.

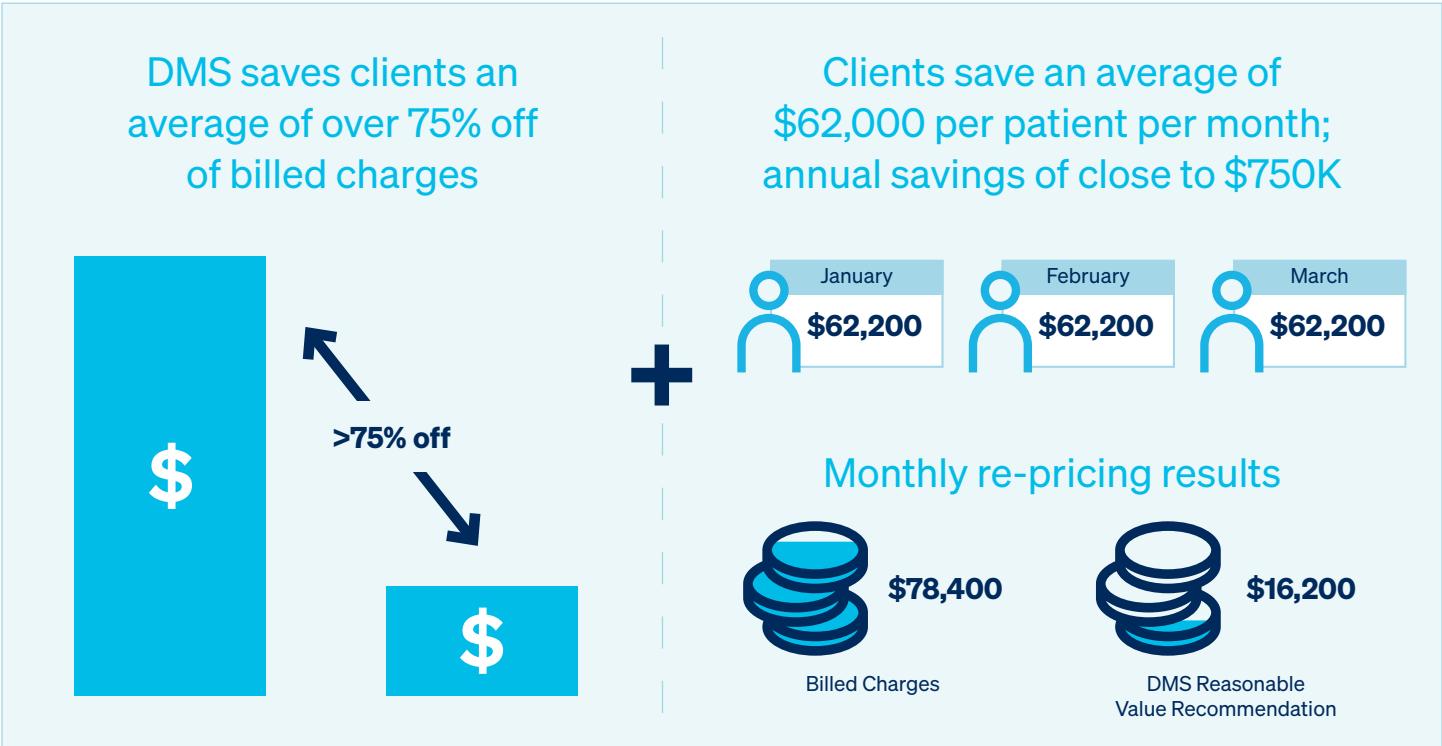
¹ <https://www.cdc.gov/kidneydisease/publications-resources/2019-national-facts.html>

² <https://www.usrds.org/reference.aspx>



Solution

To protect their health plans, employers must find ways to reduce the frequency and cost of dialysis claims. Dialysis Management Solutions (DMS) has been helping clients manage outpatient dialysis claims for more than 10 years. The DMS Care Management program coupled with the DMS Reasonable Value re-pricing methodology enables employers to reduce their costs while focusing on patient care. The DMS Care Management program proactively identifies at-risk members allowing case managers to engage with patients and provide safer, better options for initiating dialysis. In some cases, through case manager education and involvement, members are able to delay or even prevent the need for dialysis. Clients implementing the DMS program have saved more than 75% off billed charges on average, including all program fees and costs.



DMS Net Client Savings reflects savings off billed charges based on total costs including provider payment and all program fees.

Core Components



Plan Design

Benefit from our experience and avoid costly mistakes. DMS provides employers with a flexible program backed by our proprietary plan language that is designed to withstand provider pushback and includes appeal support. The DMS plan language was developed to be as defensible as possible to ensure employer savings stick.



Data Mining

Don't miss the signs of CKD and ESRD in your groups. DMS will work with your TPA to implement monthly data feeds to help identify at-risk members while tracking the progression of CKD and initiating case management. Early intervention can play a critical role in improving the member experience and controlling overall costs.



Cost Reduction Strategies

The primary objective of the DMS program is to help employers save money on dialysis claims through prevention and reduction in claim costs. DMS has several methods to help self-funded ERISA plans reduce their dialysis claim costs. Negotiating Single Patient Agreements or Facility-Level Agreements often results in greater savings than those provided by many PPO networks.

When negotiated agreements are not feasible with a particular provider, DMS offers re-pricing services using our proprietary Reasonable Value methodology. On average, our clients save over 75% off billed charges through the Reasonable Value re-pricing. Implementing the DMS program can also save employers money on their stop loss costs through reduced premiums and deductible lasers.



Care Management

The best way to help at-risk patients is through the outreach of highly trained case managers. Providing patients with education and individual support empowers them to take ownership over their condition and treatment plan. Case managers can help them make better informed lifestyle decisions, such as eating a healthy diet or limiting alcohol intake. The more the patient understands, the more likely they are to make better decisions.

Initiating dialysis is an important issue that rarely generates enough attention. More than half of all dialysis patients start their treatments in the emergency room. Meeting your nephrologist for the first time in the emergency room is not the optimal way to begin dialysis. Case managers can assist members in planning for dialysis, giving patients enough time to choose the best facility and treatment modality for them based on their own unique patient profile. Case managers also understand and can help educate members on the importance of Medicare entitlement and the benefits of timely enrollment.





Get Started

Implementing DMS

Adding DMS to your plan can be done in a few easy steps. Provide DMS with a copy of the Plan Document for review. DMS will prepare an amendment to incorporate the DMS plan language into the Plan Document. Then DMS will work with the TPA to establish monthly data feeds to identify at-risk members for case management engagement. Our case managers will work with those members with the goal of delaying or preventing the need for dialysis. In the event a member does need outpatient dialysis DMS is then ready to help the plan manage those costs through negotiations or re-pricing.

Get Started Saving

To receive a customized savings illustration based on actual dialysis claims, please provide DMS with a copy of the Plan Document, any PPO network re-pricing discount information if applicable and a full month of claims for dialysis-related services in the form of UB-92, UB-04 or HCFA's. Questions can be directed to **dms@amwins.com** or by calling **855-367-0484**.



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