# Claims

# **Medicare Advantage Claims Analysts**

## **Client Type:**

Health Plan Organization

### **Project Scope**:

**Duration**:

Medicare Advantage Claims Processing 3 Months

#### **Team Size:**

5 Remote, Full-Time Consultants





# **Problem**

This organization needed assistance **processing duplicate Medicare Advantage claims using HEALTHsuite**. The claims were split between HMO and PPO, with a small percentage of special needs plan claims. Our client was defining new processes as the project began, so they were seeking staff who could **easily adapt to quickly changing priorities**. Additionally, they requested consultants with the **ability to effectively work from home**.



# Response

Jacobson provided five remote claims employees fitting our client's requirements. These experts **researched provider-disputed claims** to determine root causes, evaluated contract terms and interpreted provider and member correspondence, and compiled supporting documentation. They then **reprocessed or adjusted claims in accordance with established CMS guidelines**.



# **Solution**

Jacobson's claims analysts successfully processed our client's **backlog of Medicare Advantage claims** and helped the organization catch up on service requests. The client reported that our consultants proved themselves to be **resourceful**, **self-reliant and flexible**.

