

BRMS TPA Services

BRMS is focused exclusively on providing easy-to-use, fully compliant services to employers of all sizes.

Self-Funding Expertise

Self funding is a leading option for companies who are struggling with the rising costs of healthcare. Independent studies have shown that self-funding can cost as much as 40% less than comparable coverage via insurance companies. In addition, TPAs offer a cost-effective outsourcing solution to the administrative services associated with a self-funded plan.

ADVANTAGES OF SELF FUNDING:

- Increase cash flow and save dollars
- Ability to customize the plan to meet the specific health care needs
- Maintain control over the health plan reserves, maximized interest income.
- Not subject to conflicting state health insurance regulations/benefit mandates regulated under federal law (ERISA).
- Not subject to state health insurance premium taxes, which are generally 2-3 percent of the premium's dollar value.
- Freedom of choice to contract with the providers or provider network best suited to meet the health care needs of its employees.
- Sophisticated customer service & enhanced reporting.

Plan Design & Consultation

BRMS specializes in plan design and consultation based upon an employer's specific goals and objectives. The following plan services are available at BRMS:

- Plan Design and Council
- Education & Advice on Industry Trends
- Prepare & Audit Plan Documents
- Online Data Management

BRMS leverages our staff and seasoned expertise to assess risk and provide the right reinsurance. BRMS is approved by all major direct and MGU markets. You receive extensive reporting to review and analyze claims activity for better decision making.

Claims Administration and Auditing

BRMS processes and manages all Medical, Dental, Vision and Retiree claims efficiently and accurately with an impeccable turnaround time. With eligibility transferred from our Virtual Benefits Administration System (Vbas) nightly, eligibility is completely current. And, with PPO negotiation expertise, we specialize in reducing employer claims costs.

End-to-End Administration

Each and every claim we receive is examined and adjudicated. Processors review claims for potential TPL, COB, appropriateness based on age, gender, diagnosis and procedure.

Exceptional Turn-Around Time

For clients who request weekly check runs, claims are typically processed within 5-7 business days of receipt. Claims payment for clients who request bi-weekly check runs is 14-21 days — providing funding is timely.

Claims Audit Review

BRMS offers supplemental Auditing Services as part of our standard claims administration service. BRMS utilizes ARC Review for retrospective claims audit and review. Ongoing third party audits by ARC Review determines compliance, assesses timelines of claims payment, determines monetary penalties, evaluates accuracy of payments, and assesses for potential fraudulent and abusive claim submissions, duplicates and other errors. An examination of the prior administrator's claim processing procedures is done to ensure claims were paid properly and calculated correctly.

