Frequently Asked Questions

1. What is Berkley Edge?

The Berkley Edge is Berkley Accident and Health's cost-containment program aimed at helping clients lower claim costs and improve the overall cost of health care. It includes proactive risk review and engagement with our on-staff clinical and claim professionals, as well as a broad portfolio of cost-containment resources and solutions. We work together with the administrator, broker, and client to identify savings opportunities before, during, and after the claim. Our clinical professionals recommend strategies that we believe will deliver the best clinical and financial outcomes.

2. Is there a cost to use Berkley Edge?

Berkley Edge is available at no additional cost to all Berkley Accident and Health clients. We provide cost-containment services to clients, such as risk reviews, analyzing and recommending alternatives, researching rare diagnoses and treatments, comparing vendor contracts, serving as liaison with vendors, and estimating treatments costs.

If clients implement a cost-containment solution, they are responsible for any external vendor costs, such as access or percentage-of-savings fees. In many situations, we have negotiated preferred pricing with vendors and openly discuss these rates with our clients. In addition, we consider most vendor fees as eligible expenses for Stop Loss reimbursement.

3. Are clients required to accept Berkley Edge cost-containment or health strategy recommendations?

No, they are not. We believe our role is to provide knowledge and expertise to help our client's decision-making process. Whether or not to accept our cost-containment suggestions is strictly up to the discretion of the client.

4. How does Berkley Edge work?

Berkley Edge operates behind the scenes, proactively reviewing 100% of claims and notices for 100% of clients. If we identify savings opportunities for our clients, we will proactively offer assistance.

5. What types of claims benefit the most from Berkley Edge?

Those claims that get to us as soon as possible. Any claim can have cost-containment potential, but typically, the earlier we get involved, the better. Specific diagnoses that often see the greatest benefit are: complex inpatient admissions, high-risk neonates/NICU, transplants, ESRD/Dialysis, high-cost drug infusions, spine surgery/ implants, high dollar RX, rare diseases/disorders and complex medical conditions with multi-system failure.

Considering the continued rise in health costs, employers who are willing to challenge the status quo through innovation and out-of-the-box thinking are often the most receptive to our services.

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Why Berkley Edge?

High-dollar claims are becoming more common. An analysis of our Stop Loss claims data found that the frequency of claims over \$1 million grew by more than 250% between 2013 and 2017.

Berkley Edge is a key part in our strategy and overall commitment to health risk management. We're dedicated to helping our clients identify ways to proactively get an edge over rising health costs.

What is the goal of the program?

Berkley Edge's goal is to influence the cost of care by fostering a collaborative partnership between our team and the administrator, broker, and client that leads to optimal clinical and financial outcomes.

Our aim is to find the best care at the best price.



6. How often do you identify claims that require intervention?

The majority of the time, our Berkley Edge team finds that claim costs are being appropriately managed and contained. This means that – based on the information we have – the care, cost, and treatment all fit with what we typically see, and we do not intervene. However, in the minority of claims where costs exceed what we ordinarily see, that's when Berkley Edge proactively steps in to offer assistance.

7. What are some examples of Berkley Edge recommendations?

We have a well-documented track record of helping clients to lower their health care costs. Here are some examples of past client recommendations:

- Identified a lower-cost dialysis strategy that was implemented by the client
- Discovered a problem with a chemotherapy bill for a cancer patient, where the billed units (\$1.9 million) did not match the average wholesale price (AWP) units (\$330,000), resulting in a \$1.58 million correction back to the employer's plan
- Identified ineligible charges for an air ambulance bill that brought the billed amount of \$60,675 down to \$35,675, saving the plan \$25,000
- Helped a client access a Centers of Excellence network for an upcoming stem cell transplant at the patient's preferred facility, resulting in nearly \$94,000 in savings off the initial estimate

8. What are the strengths of the Edge program?

- Proven: We have a well-documented track record of assisting our clients to lower their health care costs.
- Easy: We review 100% of claims, 100% of the time, with a process that is transparent to our clients.
- **Collaborative:** Our goal is to influence the cost of care by fostering a strong working relationship with the administrator, broker, and client leading to optimal clinical and financial outcomes. Our aim is to find the best care at the best price.
- **Before/During/After the Claim:** Even before a high-dollar claim occurs, we are looking at the root causes of large claims. Our support continues once a claim or notice is received and ends with post-claim audits and reviews.

9. Why is Berkley Edge important?

With large health claims growing in size and frequency, employers need support controlling costs. Berkley Edge provides a "second set of eyes" on health claims, screening them to identify client savings opportunities.

As one of the largest independent stop loss providers, Berkley Accident and Health reviews thousands of high-dollar claims each year. We're focused solely on large claims, which has given us a unique perspective and specialized knowledge. Employers can feel confident knowing that our team is by their side.

10. What are the qualifications of the Berkley Edge team?

Our clinical cost-containment RNs and health risk strategist are all registered nurses with extensive medical management experience and stellar insurance and reinsurance knowledge, as recognized through professional certifications (CCM, CRRN, CMCN, and AATMC). They demonstrate the ability to think critically and possess exceptional communication and customer service skills. They are skilled liaisons who can quickly connect clients to the most appropriate resources.

Our claim analysts have an average of 12 years of experience handling Stop Loss claims, as well as a breadth of experience with all types of health insurance claims.

Additional questions? Contact your Berkley Accident and Health representative.

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9/21

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