

Is Your Hospital Losing MILLIONS to Inaccurate Transfer DRG Reductions?

Transfers to post-acute care have increased by 74% since 2005. Government payers automatically reduce payments on all post-acute transfers regardless of outcome.

Tracking specific post-acute discharges for underpayment risk is complicated. No software or clearinghouse data can effectively solve this problem for you.

Hospitals are **exposed to transfer related underpayments** when discharged patients do not, or cannot, follow post-acute care instructions. Complex reimbursement rules, a national rise in post-acute discharges, and unforeseen patient circumstances can be **costing your hospital millions of dollars in lost revenue!**

CMS Transfer DRGs Skyrocket Since 2005



ParaRev's Transfer-DRG Review is BETTER

ParaRev overcomes Medicare and Medicare Advantage's major obstacles to recover substantial revenue.

Why Our Post-Acute Transfer Review is Better:

- Big firm experience, small firm personalization. Our analysts leverage technology, decades of experience, and industry leading methodology to uncover more revenue.
- Our retrospective review can uncover lost Medicare revenue from the past 4 years.
- ParaRev reviews ALL Medicare & Medicare Advantage postacute transfer discharges.
- Every identified claim is independently *researched* and *verified* by our team.
- ParaRev's strategic approach does NOT depend on outdated clearinghouse data, and leads to greater recovery efforts, even behind other teams and vendors.
- ParaRev ensures claim adjustment and tracking through adjudication are always in compliance.

Over \$3 million in post-acute transfer related underpayments RECOVERED by **ParaRev.**

-University Hospital on Epic

\$3.5 million in transfer related underpayments.

-Hospital system in Ohio