

## CHALLENGE:

Tower was engaged to prepare an MSA for a 54 year old partial quadriplegic. The lack of current medical records, the erratic behavior of the patient, the quality of the provider's treatment coding, and unknown treatment outside of the WC Plan were challenges to preparing an accurate MSA. The preliminary MSA amount was **\$424,528**.

# MSA Optimization Case Study

## SOLUTION:

In review of the treatment records, Tower's medical experts were able to identify several instances where Medicare covered expenses could be reduced as part of Tower's Optimized MSA process.

At Tower's request, the client obtained current medical records. Tower's clinical team reviewed those records and the corresponding billing codes used for all treatments. By analyzing the provider's treatment methods against Medicare's reimbursement requirements, Tower was able to identify items that were more accurately priced with alternative codes. One instance identified was a determination that a catheterization code (A4353) was used incorrectly. By using the correct billing code and applying other cost savings strategies to the treatment regimen, the MSA dollars were significantly reduced.

To ensure that CMS would accept the updated medical coding, Tower detailed how the original billing code was incorrectly used and then provided the correct coding.

## RESULTS: \$175,867 in Savings

Upon finalization of the optimized MSA, a total allocation amount of **\$248,661** was submitted to CMS for review and approval. CMS accepted the proposed MSA amount and responded with a **Full Approval**. Using Tower's proprietary processes and technology, the client carrier was able to reduce the Medicare exposure of this settlement resulting in total savings of **\$175,867**.

