

---

« [Are Minimum Premium Plans Making A Comeback?](#)

## AMPS Achieves 100% Growth in 2012 – Touts Cost Plus Model



“The PPO replacement model has been a perfect line extension for AMPS because it takes advantage of all of our strengths as a company. *Anyone can take a claim and re-price it at some equation of Medicare* but doing so without first scrubbing the claim for errors and invalid charges still means the payer is taking a discount on a dirty billing. Our legal team’s technical acumen and employee support is the additional difference-maker in our **Cost Plus** model, as it allows us to provide complete protection services coupled with highly proactive member communication and advocacy.” – Mike Dendy

MyHealthGuide Source: Advanced Medical Pricing Solutions (AMPS), 1/25/2013, [www.advancedpricing.com](http://www.advancedpricing.com)  
Advanced Medical Pricing Solutions (AMPS), a national leader in healthcare cost management services, announced that growth in 2012 was over 100% with top line and bottom line revenues doubling for the fiscal period.

“Having just completed our eighth (8th) year in business we were very pleased with our 2012 results as both our gross revenue and profitability doubled”, said **Mike Dendy**, AMPS CEO/President. “Our client base now spans organizations as large as State Governments and Fortune 500 Companies as well as hundred man self funded groups. Essentially anyone who has a financial stake in their healthcare costs can benefit from our professional services,” Dendy continued.

### Bill Reviews and Confirmations and PPO Replacement Services

In 2012, AMPS expanded beyond our traditional base of physician directed hospital billing reviews and into PPO replacement services and Cost Plus management.

“Our eight years of claims review history clearly show that the legacy payment system is a losing proposition for employers and that if a process of PPO enhancement through billing confirmations and adjustments is not used employers are overpaying by over 25% on most hospital bills”, said Dendy.

“The overcharges come in the forms of clinical errors and gross mark-ups as well as old fashioned fat finger mistakes and it takes a sophisticated technical and clinical process to both find the errors and also adjust the charges to make the fees fair and reasonable for both the payer and provider alike”, Dendy added.

AMPS continues to enhance the most sophisticated software system in the industry that tees data up for our physician panel and allows them to efficiently and effectively find and adjust billing errors and overcharges that claim payment systems and the most experienced claims examiners can’t possibly do on their on.

**The PPO replacement model has been a perfect line extension for AMPS because it takes advantage of all of our**

**strengths as a company. Anyone can take a claim and re-price it at some equation of Medicare but doing so without first scrubbing the claim for errors and invalid charges still means the payer is taking a discount on a dirty billing. Our legal team's technical acumen and employee support is the additional difference-maker in our cost plus model, as it allows us to provide complete protection services coupled with highly proactive member communication and advocacy.**

### **PPO Discounts VS BUCA Discounting**

AMPS moved into reviews and adjustments on BUCA payer claims in 2012 as well. We found exactly what we have suggested to the payer market since our inception, that the BUCA discounts are significantly greater than those provided by the rental PPO community but that the process of payments by the large carriers is flawed to the significant favor of their network providers.

“The BUCAs are just as enslaved by their relationships with providers as the rental PPOs and they tend to take a ‘see no evil, hear no evil’ position regarding billing mistakes and overcharges. We have seen BUCA discounting that appears to be at the 60% or greater level but when it is broken down and benchmarked is still well over 200% of Medicare allowable, said Dendy.

“To me, this shows that there is still a very solid position for TPAs in the marketplace but only if those payers take a very thorough investigative approach to paying larger bills in particular”, continued Dendy. “The PPOs that maintain a rigid “no audit of our claims” position are in direct opposition to the fiduciary responsibilities of the employer, TPA, and broker alike, but those that have a more partner-centric approach allowing the combination of reasonable discounting on accurate billed charges can continue to be competitive in the marketplace.”

### **About AMPS**

Advanced Medical Pricing Solutions (AMPS) is a cost management and containment company based in Atlanta, GA. and Phoenix, AZ. Contact **John Powers, Sr.**, VP of Sales, at [jpowers@advancedpricing.com](mailto:jpowers@advancedpricing.com), 630-361-2525 and visit [www.advancedpricing.com](http://www.advancedpricing.com).

Editor's Note: For more information on the Cost Plus Model, visit [www.costplusinsurance.com](http://www.costplusinsurance.com)

This entry was posted on Sunday, January 27th, 2013 at 9:25 am and is filed under [Uncategorized](#). You can follow any responses to this entry through the [RSS 2.0](#) feed. Both comments and pings are currently closed.

Comments are closed.

---

Risk Managers is proudly powered by [WordPress](#)  
[Entries \(RSS\)](#) and [Comments \(RSS\)](#).