



Employee Advocacy Program

Members who have issues with their insurance carriers can have lower productivity and morale. Resolving issues with insurance carriers can be a daunting task. Having a trained professional who understands the intricacies of the healthcare system and how to navigate through it can truly be a life saver. For those employees who need help, they can access the Seneca Employee Advocacy program.

Personalized employee support.

- Claim Assistance
- Eligibility issues and resolution

Seneca Advocates help sort out and solve claims and related paperwork problems. We work on coverage issues and help members understand their benefits.

Examples of services include:

- *Researching a member's outstanding out-of-pocket responsibilities and resolving errors with providers and/or their health plan.*
- *Correcting balance-billing problems.*
- *Resolving eligibility problems and benefit and claim denials.*
- *Correcting charges incorrectly applied to the member's deductible.*
- *Coordinating benefits between dental, medical, workers compensation and disability carriers¹.*
- *Resolving incorrect plan procedure interpretations such as emergency room claims denied for a lack of precertification.*
- *Assuring correct application of provider network status.*
- *Providing payers with additional information required to correctly pay a claim or apply a benefit.*
- *Resolve coordination of benefits disputes between multiple carriers.*
- *Resolving errors in the application of deductibles and co-payments.*

Advocacy Program

- Employee personalized service
- Issue tracking and reporting
- Measurable ROI
- Online issue tracking
- Automated updates

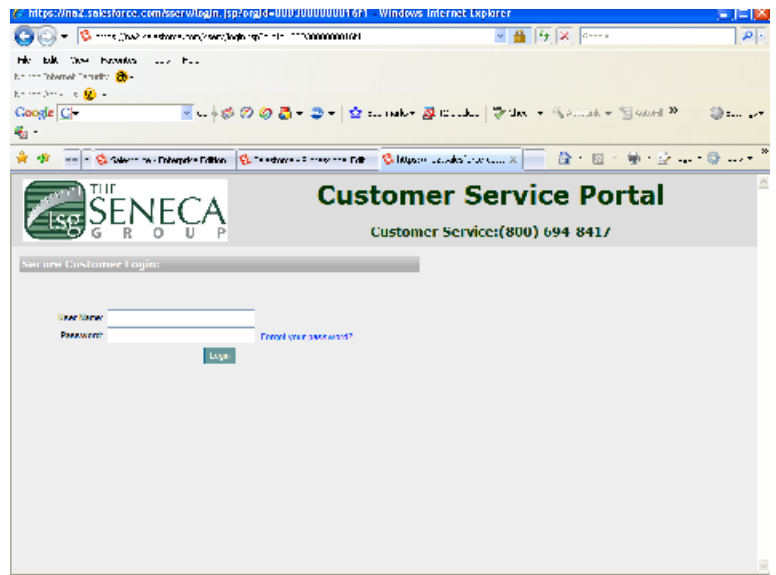
HIPAA Compliant

The Health Insurance Portability and Accountability Act of 1996, established legislation for the protection of "individually identifiable health information."
Our staff members are fully trained in providing member service in compliance with the Security requirements of HIPAA.

¹ For plans that Seneca represents

Call tracking and case resolution

The Seneca Group provides clients with completely secure Web-based access for account management issues. "Cases" can be created in three different channels. Management and Labor trustees can notify Seneca Consulting of any issues by 1) phone, 2) e-mail, or 3) through the Seneca Consulting customer service portal. Regardless of the way that issues or "Cases" are transmitted to The Seneca Group, we log the date and time for each case and provide Web-based access to view case status. The account management team at Seneca will send an e-mail confirmation at the time a case is created, as well as provide, through a secure portal, any updates until case resolution. Once the case has been closed, the contact who submitted the case will be notified. Claims auditing for compliance purposes is only part of the story. Because we audit 100% of claims, Seneca Consulting Group has the unique ability to data warehouse claims for our clients, making the information available for other important applications, such as plan modeling and care management.



About Seneca

Founded in 1994, Seneca Consulting Group, Inc. provides quality, cost-effective health benefits consultation to employer organizations, Third Party Administrators, unions and municipalities through clinical expertise, benefits design, and advanced technology systems. As a client of Seneca Consulting Group, you will be able to better understand and manage the issues and risks related to your employee benefits package. You will gain more control over benefits costs without compromising benefits.

If you're looking for higher quality service that delivers value, turn to the Seneca Consulting Group.

Please contact us at 631-577-4092.

