

UMR Guide for Hospital Benefit Plans

Putting your plan to work for you and your employees



Like most employers, hospital plan sponsors are struggling to deal with the rising cost of health care. As a hospital or health care system, this is further complicated by your role as both employer and provider. Your complex benefit needs require innovative solutions and a partner that understands the challenges you face.

UMR is that partner. We offer you flexible plan designs, integrated care management and pharmacy solutions, and timely and reliable plan data. Combine that with a team dedicated to serving hospitals and you have everything you need to design a benefit plan to meet the needs of your employees while managing benefit costs.

UMR offers		Your benefits
Benefit plans and administration	Ability to administer multi-tier benefit plans, with the most common being a three-tier plan.	Tiered benefit plans encourage members to use domestic providers and allow you to keep care within your hospital or health system.
	Capability to suppress checks for payments to the hospital's domestic providers and facilities. These transactions are still captured in all claims data.	Funds are not suspended during processing and delivery, increasing cash on hand and improving cash flow.
	Unique service model in which customer first representatives (CFRs) answer calls and pay claims. CFRs that administer hospital plans receive specialized training on the intricacies of hospital benefit administration.	Increased accountability and first-call resolution that results in improved member satisfaction. Superior customer service for you and your members from a team that understands your organizational culture.
UMR offers		Your benefits
Network administration	Option to customize the configuration of the domestic network.	Maximizes the care that stays within your facilities and network. Allows you to have services your hospital does not provide paid at the domestic level so members are not penalized.
	Flexibility that allows hospitals to set their own domestic reimbursement.	Provides independence from managed care contracts and increases your ability to control plan costs.

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UMR offers		Your benefits
Care management	Customized care management programs that defer to hospital initiatives.	Leverages core competencies of your hospital and UMR, avoiding duplication of efforts.
	Integrated wellness programs that are customized to the hospital's organizational culture.	Flexibility with biometric screenings, health risk assessments, coaching etc. Allows you to identify meaningful incentives for your employee population.
	Ability to customize clinical criteria.	Drives use of domestic resources and provides more control over benefit costs.
UMR offers		Your benefits
Pharmacy	Flexible pharmacy benefit plans with a national wrap network.	Increases domestic utilization and maximizes savings.
	Assistance with transforming an in-patient pharmacy into a retail outlet for employees.	Keeps revenue within the organization and provides a convenient pharmacy option for employees.
	Variety of pricing strategies, such as GPO, 340B and alternative source pricing.	Reduces costs by leveraging greatest discount available on prescription drugs.
UMR offers		Your benefits
Reporting	Online access to the Optum Benefits Analytic Manager.	Strategic evaluation of your benefit plan's performance relative to other populations, with benchmarking at national, regional and industry levels.
	Hospital reporting suite provides utilization reports and extensive splitting of foreign and domestic claims data along with UMR hospital-specific benchmarking.	Provides valuable information to help you make informed decisions about your benefit plan.

* Hospital must furnish a custom domestic fee schedule; domestic claims cannot run through the PPO network. Domestic utilization is based on overall medical cost of the plan, excluding pharmacy, dental and other coverages.

Consult your UMR representative to learn more about the value we can bring to your hospital's benefit strategy.



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