

AGGREGATE CLAIM
POLICIES & PROCEDURES

1. If a group has aggregate coverage, census and paid claim numbers must be reported each month. The MDU Aggregate Claim Report is provided for your convenience in submitting this data; however, we will accept your own internal form if it captures the same information.
2. All aggregate reports are reviewed by the MDU Claims Department to determine possible future liability.
3. Routine inquiries are made to the Claim Administrator by Underwriters & Claims regarding the increase of claims experience, if any. Possible on-site audits may be performed at this time.
4. If any group has exceeded the aggregate attachment point and the Administrator has submitted an aggregate request for reimbursement, the following actions are taken:
 1. Aggregate Excess Reinsurance Request for Reimbursement is completed by the Claim Administrator.
 2. The auditor reviews all reports submitted by the Administrator (Please refer to the Aggregate Request for Reimbursement for further details.)
 3. The auditor determines whether an on-site audit or a desk audit will be conducted. This is often based on the amount of "remote" access the Administrator can provide to the auditor.
 4. Random selection of claims is done from the paid claim reports. The administrator will need to provide all supporting documentation for the claim to include legible bills, EOB's, eligibility, and investigational material relative to the claim.
 5. The Administrator must provide MDU with a detailed census/eligibility report for the entire 12 month participation period to confirm the accuracy of the attachment point.
 6. Review of enrollment cards, including updates to determine new hires and possible COB and identify any inconsistencies with the employees'/dependents' reported eligibility.
 7. Claim files are reviewed for payment accuracy according to the Plan Document as written, as well as all executed amendments.
 8. Bank statements are reviewed to determine claims funding.

5. Aggregate Accommodation – An Aggregate Accommodation Request for Reimbursement form must be completed by the Claims Administrator. Depending upon the dollar amount of the requests, an on-site audit may be implemented.