

\_experience the commitment



# Fraud and abuse prevention

## Corporate profile

CGI is a leading IT and business process services provider. We couple extensive healthcare expertise with a full range of solutions to help clients achieve their business goals.

Our healthcare clients have included many Blue Cross Blue Shield plans, managed care organizations, commercial health insurance companies and government healthcare payers. CGI understands healthcare industry trends and is a leader in developing innovative business and technology solutions that help healthcare payers remain competitive in a rapidly changing regulatory and market environment.

Our business solutions include cost containment and reimbursement consulting, clinical and compliance auditing, clinical audit software, fraud detection systems and care management services. Our IT services range from complete managed care services and systems integration to application development and maintenance.

## Detection and management software services

Healthcare fraud is a serious and pervasive problem in today's healthcare industry. It has been widely reported that fraud, waste and abuse in the healthcare industry can be as high as 10 percent or more of dollars paid. By implementing anti-fraud programs, payers can effectively save money; the dollar benefits of anti-fraud programs far outweigh their investment.

To help payers combat healthcare fraud CGI has developed effective software tools that identify potential fraud and abuse. With CGI, payers can tackle the fraud and abuse that has already occurred within their organizations and set the stage to discourage these practices in the future. CGI's services and software solutions identify which physicians, providers and claims need to be examined, and target both medical and pharmacy claims.

Our comprehensive suite of fraud and abuse services and solutions include:

### ***Fraud and abuse software system***

This CGI software system is driven by our proprietary episode of care technology. CGI takes a multi-dimensional view of each claim submitted. By creating these episodes, CGI identifies inappropriately coded or submitted claims, and potentially identifies cases that warrant further investigation for recovery. Some of the areas that are examined include:

- Medically impossible procedures
- Services billed while the patient is hospitalized
- Non-covered services that were paid
- Provider billing errors
- Provider up-coding and miscoding
- Duplicate services across providers and claim types
- Phantom ambulance trips
- Complimentary services missing a complimentary claim
- Excessive provider utilization
- Physical, speech, hearing and occupational therapy
- Rent-a-patient schemes
- Services rendered outside of a specialty

## Detection and management software services

### *Customized Audit System (CAS<sup>SM</sup>) 4.0*

CAS empowers healthcare payer claims auditors to review, thoroughly investigate and act on aberrant claims data, right from their work stations and without intervention of scarce information systems resources. This leading claims targeting and audit management tool has a proven track record and is already used with payers ranging in size from 60,000 to 3 million members. The advantage of CAS is its ability to be adapted and customized to each payer's needs. CAS applies your business rules, reimbursement methodologies and medical guidelines to identify claims inappropriately paid due to provider billing errors, resulting in a highly effective and focused audit process. CAS is a thorough and comprehensive audit tool to support your audit team and is available in either an installed or ASP mode to allow flexibility in delivery.

### *Pharmacy benefit management auditing system (CAS RX)*

CGI's CAS RX system is an integrated suite of products that includes an electronic pharmacy claims analysis desk audit component, positive confirmation letter generation, a correlation analysis component and pharmacy field audit software. The systems are customizable to your requirements and can work together or as stand-alone components. Included are pre-programmed standard edits and the ability to create new edits. Multiple sorts and views of data are possible via the report writing features. CAS RX is a powerful solution to manage your audit process; to detect overpayments, process errors, potential fraud and abuse, and misuse of prescription benefits; and to track recovery.

### *Comprehensive special investigation services*

CGI provides comprehensive SIU services for all lines of insurance. Our services include internal investigations, case management, customer support, claims assistance, statutory compliance, reporting and fraud awareness training. CGI's staff consists of investigators who are law enforcement professionals with experience in fraud and criminal investigations.

## Protect your organization

With CGI's comprehensive suite of fraud prevention services and solutions, you can avoid costly and time-consuming abuse. The result is a secure, customer-friendly, scalable set of services and solutions that safeguard your organization. Benefits include:

- Quickly review, investigate and act on aberrant claims
- Automatically detect overpayments, process errors, potential fraud and abuse, and misuse of benefits
- Create an environment that discourages future abuse
- Access low-risk and high-return services and solutions that reduce total claims

Business solutions through information technology™



ISO 9001 Certified

For more information: [www.cgi.com](http://www.cgi.com)