

_experience the commitment



Medicaid Claims Audit and Collections Case Management

Proven results

Our offering is powered by two of CGI's proven solutions—CACS®-G and CAS—which have been used in more than 300 institutions. Here is a sampling of these powerful solutions' results:

- CGI's collections, prospecting and discovery solutions have allowed U.S. state governments to identify and collect in excess of \$1.5 billion over the past decade.
- For the Commonwealth of Pennsylvania, CGI implemented its CAS system to audit their Medicaid claims. As a result, the state recovered millions of dollars. Pennsylvania has since selected CGI to conduct Medicaid claims auditing and recouping for three years on an outsourced basis. CGI will audit inpatient, outpatient and professional claims to determine if they were reimbursed properly according to OMAP regulations.

While each application can be implemented independently, together they form a powerful, comprehensive compliance solution. Benefits of the CACS-G and CAS solutions include:

- Increased revenue collections
- Reduced costs
- Improved overall compliance
- Improved administration of accounts receivable
- Effective staff utilization
- Improved customer service

Services and solutions that revolutionize compliance and debt collection

Spending on the Medicaid program in fiscal year 2006 totaled \$300 billion. While a nationwide improper payment rate has not yet been established, a typical error rate as low as 3% would result in \$9 billion in overpayments. With in-depth government and healthcare experience, CGI understands the challenges Medicaid agencies face in managing the overpayment recovery process, and has the solutions that enable agencies to identify, validate, pursue and recover these overpayments. Our Medicaid Claims Audit and Collections Case Management offering—which includes collections, audit and recovery solutions and services—supports full life-cycle overpayment recovery.

CGI provides a robust suite of tools and subject matter expertise to support Medicaid agencies. These tools can be implemented as an integrated whole or individually to meet the needs and requirements of each specific agency.

Collections Case Management through CACS-G

Having helped 20 states and the Internal Revenue Service increase collections from delinquent debts, CGI's CACS®-G solution (Computer-assisted Collection System for Government) is a collections case management tool that is specifically designed for government. It allows agencies to increase collections while reducing the associated costs. Functionality includes:

Tools for proactive automated collections—Government collections departments face an ever-growing number of delinquent cases, with fewer staff to work these cases. Through automated correspondence, liens and levies, and follow-ups and ticklers, CACS-G allows staff to focus on the cases that truly need human intervention, while the majority of cases are pursued automatically. CACS-G also allows customers to make payment agreements over the Internet or by touch-tone telephone, allowing debtors to self-cure.

Tools to support audit and discovery case management—CACS-G workflow allows a department to pursue cases where a potential debt exists. Through its powerful workflow engine, potential debtor cross-referencing, and correspondence engine, agencies determine if an individual or provider has a liability. If one is established, the system then pursues the case.

Flexible, table-driven business rules—CACS-G implements case management workflow through table settings, allowing an agency to define and implement its optimal workflow. It also enables sophisticated workflow strategies, including segregation of accounts by location, dollars owed and risk of nonpayment.

Services and solutions that revolutionize compliance and debt collection

In addition to the above features, CACS-G provides the following functionality and benefits:

- *Flexible, ad-hoc reporting*—allows managers to track and measure performance, as well as trends, error reporting, exception account management and operational tracking
- *Computer-based training (CBT)*—reduces training costs and enables collectors to quickly become proficient
- *Commercial off-the-shelf (COTS) package*—enables rapid implementation
- *Flexible, open, web-based architecture*—enables deployment of the system within each agency's existing architecture and allows users to run the application through a desktop browser
- *Effective staff utilization*—allows departments to focus limited collections resources on the cases that truly need collector intervention

Services and solutions for audit and recoveries

Through CGI's healthcare claims audit and recovery software and services, typical recovery dollars identified are 1-3 percent of total reimbursement subjected to review. Customizing solutions to meet agency's specific regulations and reimbursement methodologies, CGI's audit and recovery offering areas include:

Inpatient claims review—CGI identifies inpatient claims with potential coding and billing errors. The inpatient auditing system employs more than 100 edits to screen inpatient claims for potential upcoding, diagnosis sequencing errors, place of services issues and DRG creep. Through the use of CGI's CAS (Customized Audit System) solution, our leading claims targeting and audit management tool, coding and billing errors are electronically identified for manual validation.

Outpatient claims review—The CGI outpatient auditing system identifies hospital outpatient coding errors. The solution screens claims for errors, inappropriate coding, unbundling, case rate violations as well as documentation, payment window and contractual issues. The system includes Medicare's Outpatient Code Editor and reviews more than 25,000 coding combinations.

Professional claims review—CGI's professional auditing system identifies and electronically corrects improper CPT-4 coding to eliminate inappropriate, increased payment of professional claims. Through the use of CGI's CAS solution, CPT upcoding and unbundling, duplicate billings, surgical and maternity global violations, and many other provider billing errors are identified.

Outsourced claims audit services—CGI provides the option of performing claims auditing services on behalf of Medicaid agencies. Staffed by experienced auditors and clinicians, our auditing team includes coders and specialists in all types of reimbursement methodologies, with special emphasis on Medicare and Medicaid reimbursement. Our professionals investigate claims to confirm overpayments and inappropriate payments and, using CAS, conduct desk and remote field audits, track record requests, generate provider letters, and provide reports detailing potential recoveries found on overpaid and incorrect claims.

Company profile

At CGI, we're in the business of satisfying clients. For 30 years, we've operated upon the principles of sharing in clients' challenges and delivering quality services to solve them. A leading IT and business process services provider, CGI combines industry expertise with a full portfolio of services—consulting, systems integration, the full management of IT and business functions, and 100+ proprietary solutions—to improve clients' operations, helping them become more efficient and productive.

In government, CGI is a leader in developing innovative business and technology solutions that help the public sector maximize revenues and efficiencies while improving service delivery. In the U.S., CGI has partnered with a majority of state and federal agencies, as well as 300+ local governments.

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