

# CGI ProperPay



Predicting and preventing fraud, waste and abuse for healthcare payers

Since 1990, healthcare insurers have identified and recovered billions of dollars using our fraud, waste, and abuse solution, CGI ProperPay. Coupled with expert services provided by our clinicians and analysts, our government and commercial clients have recovered \$3.0 billion of improperly paid medical and pharmacy claims.

## Predict, prevent, protect and preserve

CGI ProperPay is a data-driven solution used to predict, identify, manage, and recover on claims that have been improperly paid. It is configurable to an organization's specific business rules and reimbursement methodologies. Its predictive analytics, workflow management, rules management, and global best practices provide both flexibility and scale. Our solution includes:

- Advanced algorithms to unearth hidden patterns and anomalies within the entire claims data universe and to identify claims with high potential for recovery.
- Analytics provide the framework to prevent fraudulent activity and keep patients safer by allowing staff to easily identify patterns and research claims as well as audit data through a series of views and dashboards.
- Protecting client data is important in any industry, but is critical when dealing with protected health information. CGI ProperPay implements rigorous data security measures.
- We bring depth of knowledge of modern technology to identify, stop and recover improper payments to preserve healthcare funds and revenue. Balancing modern technological tools with years of clinical and auditing expertise generates a greater number of improper payment recoveries and makes funds available to improve patient care. Business user-friendly features also free up valuable IT resources for other priorities.



## A partner of choice

CGI is a leader in providing innovative business and technology solutions to the healthcare payer industry. Our clear vision and ability to deliver results have made us the partner of choice for many commercial health insurance companies and government healthcare payers and insurers.

Solutions include:

- CGI ProperPay for comprehensive claims auditing and fraud and abuse detection pre-and post-payment
- Clinical and compliance auditing and analysis services
- Reimbursement consulting and pricing solutions
- Fraud investigation services including special investigative unit
- Outsourcing and co-sourcing
- Complete IT services

We also provide expert recovery audit and payment services covering all provider types, focusing on payment issues with a high rate of error and yield a return on investment. Our specialized healthcare professionals bring over 25 years of experience in analyzing and auditing medical claims data.

## Data analytics

Advanced analytical techniques detect trends and patterns to identify improper payment scenarios and select cases for review. CGI ProperPay uses claims data in combination with other data sources such as audit results to refine targets.

## Rules management

A module of cognitive business rules can be customized to payer-specific reimbursement rules and policies. CGI's standard suite of edits has been developed and refined through more than 25 years of experience to identify the claims with the highest probability of payment errors.

## Workflow management

Our comprehensive workflow solution allows the auditor to focus on the various phases of the audit process, from the screening of claims to the audit itself. The auditor can review the claims and audits for further investigation using multiple methods. Once an audit has been started, the system tracks all of the documentation and notations relating to the review to maintain an audit trail. The system also provides reference screens for auditing guidance, grouping, and pricing to aid in efficient reviews that are defensible to the highest level of appeal. Its functionality includes security levels based on specific user roles.

## Data management

Based on defined business requirements, all applicable claims data is imported into the database, which is updated continually, allowing for a comprehensive view of the overall history and furnishing a basis for trend analysis and predictive modeling.

Other data sources are incorporated into the system such as provider and member data to enhance analytical capabilities.

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## The CGI team

Our team of specialized healthcare professionals brings more than 25 years of experience in analyzing and auditing government health plans, managed care and private insurance medical data. Our team includes clinicians, health information management professionals, fraud investigators, CPAs and IT experts that bring business experience from relevant healthcare payer industries. We blend staff members from systems, claims and clinical backgrounds to develop innovative solutions that are effective and produce results.

These members have extensive backgrounds, training and certifications in the areas of healthcare management and clinical coding.

## About CGI

### Insights you can act on

Founded in 1976, CGI is among the largest IT and business consulting services firms in the world.

We are insights-driven and outcomes-based to help accelerate returns on your investments. Across hundreds of locations worldwide, we provide comprehensive, scalable and sustainable IT and business consulting services that are informed globally and delivered locally.

### For more information

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