Claims Recovery Audit Services

Successful results from government healthcare claims recovery audit contractor programs have sparked strong interest in establishing similar programs for commercial payers.

CGI is a leading provider of recovery audit services to government and commercial organizations. Since 1990, we have used our strong combination of subject-matter expertise, knowledgeable personnel and solutions to identify claims that have been inappropriately paid to providers.

Our experience has demonstrated that 5% or more of provider claims contain errors. The error percentage can add up to significant improper payments from data entry mistakes, incorrect coding of claims or other errors.

CGI offers a comprehensive approach to identify errors and provide accurate claims reimbursement. By implementing our innovative CGI ProperPay solution and services, clients have achieved substantial results, with more than $2.1 billion recovered in the last 5 years alone.

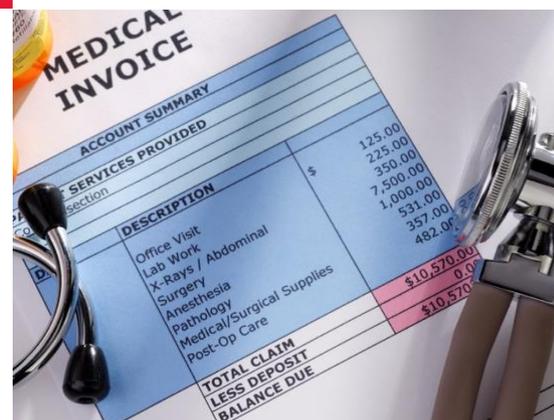## RECOVERY AUDIT CONTRACTOR PROGRAM

With experience as a Recovery Audit Contractor (RAC) for CMS Region B and several State Medicaid programs, CGI has expertise and systems in place to accelerate a RAC start-up program. We can apply our proven process to initiate a RAC program through:

- Outreach to providers
- Identification of improper Medicare, Medicaid and commercial payments through automated and complex reviews
- Recovery of overpayments
- Coordination with internal staff and other contractors with clear communication of audit findings to providers

CGI leverages our public and private sector experience in claims auditing and recovery and provides a robust audit, recovery and provider education solution. CGI capabilities leveraged for this initiative include provider outreach, data and program analytics, value-based healthcare program management and data consolidation and integration. Access and transparency to audit findings is available to providers.

We will customize our software to fit your reimbursement environment and provide your program with the following:

- **Data analysis:** CGI tools analyze claims to detect patterns and select those claims with the highest probability for error. The pre-selection report is refined and verified with your policies, regulations and payment rules to determine which claims to audit.

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 CGI the partner of choice for many BlueCross BlueShield plans, commercial health insurance companies, government healthcare payers and Pharmacy Benefit Managers (PBMs). Solutions designed for healthcare payers include:

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

- **Claims investigation:** CGI professionals verify improperly paid claims via automated, semi-automated, extrapolation reviews and complex medical records review as well as claims investigation. Our clinical coding validation process has a proven record of success in identifying overcoding. Inpatient, outpatient, professional, allied health, long-term care, DME and pharmacy claims audits are customized and reviewed based upon your payment methodology.
- **Tracking and communication:** CGI's auditing services allow for the tracking of audits, records and appeals. Our system generates medical record requests, letters and reports, as needed. Our claims review staff processes appeals within your designated time limits and provides you with sufficient information to process adjustments to claims for recovery.

RECOVERY AUDIT SCOPE

Our audit scope covers all provider types with a focus on payment issues that have a high rate of error and yield a return on investment. Examples include:

Inpatient auditing: CGI inpatient auditing identifies inpatient claims for medical necessity review, as well as those with potential coding and billing errors. Our inpatient audit process employs more than 100 edits to screen inpatient claims for potential upcoding, diagnosis sequencing errors, place of service issues and DRG creep. Regardless of whether you pay DRG, per diem or percent of charge, CGI has edits to address your reimbursement needs.

Outpatient auditing: CGI hospital outpatient auditing identifies hospital outpatient coding errors. Outpatient claims are screened for coding errors and inappropriate coding, unbundling and case rate violations, medically unlikely edits, as well as documentation, payment window and contractual issues. The software is customized to your specific methodologies and includes Medicare's Outpatient Code Editor (OCE).

Professional auditing: CGI professional auditing identifies and corrects improper CPT-4 coding to eliminate inappropriate billing and revenue optimization of professional claims. Our process also includes Medicare's Medically Unlikely Edits (MUEs) and National Correct Coding Initiative (NCCI) Edits, which are public domain and can be shared with your physician.

Allied health: CGI customizes edits for all types of allied health claims data to identify claims that have potential billing discrepancies such as upcoding, unbundling of charges, duplicate payments, policy violations, duplicate charges across various providers, date of death and others.

THE CGI TEAM

CGI's team of specialized healthcare professionals brings more than 25 years of experience in analyzing and auditing Medicare, Medicaid, managed care and private insurance medical and pharmacy data. Our team includes clinicians, pharmacists, health information management professionals, fraud investigators, CPAs and IT experts that bring business experience from relevant healthcare payer industries. CGI blends 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

Founded in 1976, CGI is one of the largest IT and business process services providers in the world, delivering high-quality business consulting, systems integration and managed services. With a deep commitment to providing innovative services and solutions, CGI has an industry-leading track record of delivering 95% of projects on time and within budget, aligning our teams with clients' business strategies to achieve top-to-bottom line results.

For more information about CGI's healthcare solutions, visit www.cgi.com/health or email us at healthcompliance_BD@cgifederal.com.