

# INGENIX<sup>®</sup>

## Prospective Investigation Services

Because prospective efforts are many times more effective than retrospective recovery alone, health plans are evolving their fraud and abuse strategies from “pay and chase” to “prevent and save.”

### Executive Summary

According to industry estimates<sup>1</sup>, health care fraud accounts for three to seven percent of our nation’s health care costs. To better manage and prevent suspected fraud and abuse, Ingenix Prospective Investigation Services proactively investigate claims *prior* to payment, helping you achieve significantly greater savings than you could with recovery efforts alone.

- **Decrease overpayments of inappropriate, incorrect, and fraudulent health care claims**
- **Reduce investigative, legal, administrative, and recovery costs**
- **Focus investigative resources on claims most likely to be problematic**

### Overview

Utilizing revolutionary fraud methodologies, Ingenix detection engines identify and flag suspicious claims based on questionable patterns and trends. Once flagged, suspect claims are reviewed and investigated by our team of experienced clinical and investigative personnel. We then prepare a report with the information needed to determine whether the claim should be paid or denied.

Ingenix Prospective Investigation Services help payers take a proactive approach to preventing fraud with pre-payment investigation.



### Provider-centric

The provider-centric detection methodology analyzes provider behavior over time and identifies those providers who consistently submit questionable claims. With client approval, these providers are “flagged.” All the flagged provider’s claims that meet certain criteria will be stopped and evaluated before payment.

<sup>1</sup> National Health Care Anti-Fraud Association, [www.nhcaa.org](http://www.nhcaa.org)

**Claims-centric**

The claim-centric methodology looks for specific patterns within individual claims (without reference to the provider), and stops suspicious claims for further investigation. This approach complements the provider-centric methodology, helping identify the claims exhibiting known patterns of suspect behavior and stop them before they are paid.

**Predictive Modeling**

The Ingenix provider-centric and claim-centric methodologies both rely on *known* patterns of abuse. Our third detection methodology, the predictive model, adds yet another dimension to our overall detection strategy by finding *new* and previously undetected suspect behavior. In the predictive model, claims are scored based on their deviance from norms established by provider peer groups, individual provider behavior over time, and patient behavior over time. The farther a claim strays statistically from these norms, the higher the score it receives. High-scoring claims can then be stopped for further evaluation before they are paid.

**A Diverse Team of Experts**

Ingenix employs a diverse team of experts with the unique skills needed to discover ever-complex schemes. We have more than 220 dedicated employees including biostatisticians, data analysts, application development consultants, criminal investigators, and clinical analysts.

**Key Features** 

Our comprehensive suite of detection and prevention tools can help you offset annual medical cost increases by reducing overpayments for incorrect or potentially fraudulent health care claims. We apply advanced analytics and technology to help you pay the right claims from the right providers at the right time by accurately detecting potential fraud and abuse. Our unique, multi-dimensional pre-payment fraud detection strategy helps you:

- Identify fraudulent and abusive claims for investigation before the claim is paid
- Augment traditional recovery efforts with information, analytics, and technology
- Focus legal and administrative resources on suspicious claims to maximize in-house special investigative unit efficiencies
- Meet SIU compliance regulations
- Lower plan administrative costs by reducing the number of false positives
- Identify aberrant trends with proprietary technology
- Leverage one of the industry's largest repository of intelligence on provider behavior
- Reduce inappropriate medical expenses

**Ingenix | Intelligence for Health Care | [www.ingenix.com](http://www.ingenix.com)**

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