Context⁴ **Medical Payment Integrity**™

Adjudication Compliance and
Fraud, Waste, and Abuse Detection

CONTEXT⁴
HEALTHCARE
SOFTWARE | DATA | INTEGRITY | COMPLIANCE

THE VALUE OF PAYMENT INTEGRITY

The strength of your health plan's service to your members relies on your focus in determining accurate plan liability. Payment Integrity is the process of making sure a health claim is paid per contract terms and without waste, abusive practices or fraudulent intent.

This isn't just calculating the claim correctly. It's about making sure that the claim accurately represents the services rendered. Fraud, waste and abuse is rampant in the U.S. healthcare industry, costing an estimated $360 billion annually.

Fraud, waste and abuse cost the healthcare industry up to $360bn each year

Context⁴ Medical Payment Integrity™ combines pre-payment safeguards using a deep library of pre-built rules that will catch provider issues along with an extensive array of pre-built reports and data extracts that will identify aberrant billing practices costing your health plan significant money. Protecting your health plan assets protects the healthcare benefits of your insureds.

PRE-PAYMENT SAFEGUARDS

Medical Payment Integrity pre-payment safeguards involve thousands of rules built and maintained by Context coding experts. Led by our Medical Director, our experts are healthcare benefits data scientists that are constantly searching the industry for emerging FWA schemes and trends.

ANALYICS AND EXTRACTS

Identifying aberrant billing patterns across your entire book of business is vital for safeguarding that plan. That's why Medical Payment Integrity also includes dozens of pre-built reports and data extracts. Your auditors and investigators will use these to help identify potential cases to pursue. The reports will get them started, and the data extracts will enable them to do what they do best: dig deep.

Here are the types of reports and extracts that are included:

- Trips to nowhere non-emergency transport
- Impossible hours
- Provider watch list
- Provider specialty drill-down
- Most frequent procedures

Each report has a data extract component, including provider specialty selections.

CONSTANT VIGILANCE AND INTELLIGENCE

We watch what's happening in the industry like a hawk. We know that new FWA patterns emerge almost daily. That's why we have a dedicated FWA research team constantly looking for new patterns. We analyze billions of new claim charges over the course of a year. In doing so, we frequently identify emerging aberrant

provider billing patterns. Our experts analyze this data to determine the FWA potential of these patterns.

The result is our Payment Integrity solution being updated *weekly*, so your health plan is guarded. This allows our customers to always have the latest logic for detecting FWA situations.

DENTAL PAYMENT INTEGRITY TOO!

Dental FWA is on the rise. There are actually training programs for dentists on how to maximize their reimbursement through multiple billings, such as billing the Medical and Dental plan for the same service. Your dental plan isn't safe.

Context⁴ Dental Payment Integrity™ is an integrated, modular solution within the **Context⁴ Health Plans Suite**™. It contains a full suite of rules, analytics, and data extracts designed to safeguard your dental plans.

Only the **Context⁴ Health Plans Suite**™ can look across both your Medical and Dental plan simultaneously, watching both sides in order to keep your plan assets safe.

ADVANCED SECURITY WITH AMAZON GOVCLOUD

For the highest level of security available on the market, the **Context⁴ Health Plans Suite**™ is deployed in the Amazon Web Services (AWS) GovCloud region. This is the same region used by the federal government for highly secure cloud deployment.

With delivery through a software-as-a-service (SaaS) model, the Context solution is easy to implement, and there's nothing to maintain. Just send us your claims and we return real-time, actionable results.

EFFORTLESS IMPLEMENTATION

The **Context⁴ Health Plans Suite**™ uses a RESTful web service to communicate in real-time with your system, examining each claim as you process it. Any system that can call the service and exchange information using XML is easy to plug in.

Should your processing workflow demand a batch process instead of real time, the Context solution can meet your needs as well. Our batch process is designed to examine the claims in the batch immediately when we receive them from you. We'll pass a batch of results back to you within minutes, so your system can consume our findings and take action immediately.

The **Context⁴ Health Plans Suite**™ uses a RESTful web service to communicate in **real-time** with your system, examining each claim **as you process it.**

A COST YOU CAN BUDGET

At Context, we believe that our customers should be able to budget for the costs of services that they use. That's why **Context⁴ Medical Payment Integrity™**. will always be based on your claim volume or your membership, whichever you choose. We will never look to take a percent of savings from our customers, because that amount can't be budgeted. You deserve to know the cost of the services you engage.

ACT NOW TO GUARD YOUR PLAN

Don't let another day go by without your health plan being safeguarded by **Context⁴ Medical Payment Integrity™**.

CONTACT US TO LEARN MORE

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