Optum

Data Mining Services



Eliminate claim overpayments

Optum® Data Mining is a comprehensive, integrated solution that blends human intelligence and proprietary technology to identify and eliminate overpayments. Our solution:

- Minimizes costs associated with overpaid claims both prospectively and retrospectively
- · Resolves claims in a timely and accurate manner
- Pinpoints the root cause of errors to prevent future overpayments

Optum analytic tools identify errant payments due to coordination of benefits (COB) and issues associated with contractual compliance, payment policies, billing errors and duplicates. Our approach enables health plans to reduce per-member, per-year (PMPY) medical spend. It also delivers powerful trending, benchmarking and peer group knowledge.

Generate critical business intelligence

Optum employs a four-tier analytic process to detect overpayments and their root causes. This process centers on a dynamic analytic engine and sophisticated statistical logic with a reason-based perspective that only human intelligence can offer. Highly trained claims analysts augment technologies by understanding the unique nuances involving client systems, billing processes, data-input drivers and other factors that affect claims handling. Results are more precise and comprehensive with each claim examined.

Health plans rely on this comprehensive solution to generate the critical business intelligence they may not have the resources or specific expertise to discover on their own. Optum goes beyond discovering and validating to help clients recover and prevent overpayments.

Data mining expertise

- Reduce complexity, inaccuracy and provider abrasion
- Comprehensive approach that brings together advanced analytics, processing services and consulting capabilities
- Identify errant payments and their root cause to prevent future overpayments
- Analysis of more than 1 million claims daily

Detect overpayments across multiple categories

Our investigative approach to overpayment investigation, prevention and recovery works across a breadth of categories, including:

- Duplicate(s)
- · Billing issues
- Coordination of benefits
- Contract administration

These represent physician, hospital, ancillary, labs and radiology settings. Analysts validate each claim to confirm the accuracy of overpaid claims and make certain they are ready for the recovery process, facilitating a smooth and efficient client review process.

Prevent future errors and corrective paperwork

Optum Data Mining helps health plans save money in three ways. First, it reviews and denies errant claims before they are paid. Second, it produces savings by identifying overpayments that have already been reimbursed. Third, it employs root-cause analysis, arming health plans with the actionable intelligence needed to prevent future errors and avoid corrective paperwork.

Optum Data Mining



Expertise

- Analysts and data scientists with extensive knowledge of government regulations and industry trends
- Interpretation of complex claims information
- Deep knowledge of claim and payment processes
- · Ability to track errors within benefits coordination and contract compliance



Technology

- Proprietary, actionable applications identify source of errors
- · Web-based tools to report errors in real time



Analytics

- · Rigorous data mining
- · Access to 9 million industry rules, regulations and policies
- · Analyzes more than 1 million claims daily
- More than 1,200 algorithms that generate insight and drive greater accuracy across the payment continuum



Collaborative approach

 Processes customized to reduce health plans' administrative costs and improve payment processes



Efficiency

- · On-site business process outsourcing
- Review of paid claims files to identify other coverage and determine order of liability
- Focus on long-term error prevention

Stop overpaying claims and reduce PMPY medical spend.

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