Health care fraud, waste and abuse hurts every health plan’s bottom line

With today’s increasingly limited resources, opportunities to maintain full compliance, identify, prevent and investigate the right cases are often missed. Special investigation units often have an abundance of work to perform with limited resources. From managing and investigating internal referrals, complying with mounting regulations, to overseeing reporting requirements, it takes people and time to accomplish these tasks effectively.
**LexisNexis® Virtual SIU™ services helps payers supplement SIU needs**

LexisNexis has developed a virtual investigative team with clinical backgrounds to help health care payers scale their internal special investigations unit.

**FW&A Program Advisory Services**

LexisNexis Advisory Services will help you to confidently assure CMS, OIG and customer auditors alike that you are a compliant steward of health care dollars, and a responsible guardian of the care that is delivered to their members.

Our consultative review of overall FWA program readiness and effectiveness, and ability to meet CMS requirements include:

- Evaluations of a plan’s fraud waste and abuse policies and procedures for benefit plans.
- On site review and interviews with key FWA program contributors.
- Review FWA program vs. CMS regulations.
- Review of staffing, technology, policies and procedures with written report detailing gaps and recommendations for improvement.
- Comprehensive findings report and risk assessment detailing preparedness for CMS audits.

**VSIU Lead Identification Services**

Detection services highlighting potential overpayment recovery opportunities include:

- Retrospective data run through rules-based analytics.
- Claim Analysis with rules and flags.
- Top Ten paid providers within Top Ten medical specialties.
- Provider ranking and scoring based on index of potential savings and probable recovery.
- Case Lead Generation.
- Review of referrals.
- Collaborate and advise on case investigation plans.
OUR BENEFITS AND VALUE

The LexisNexis Virtual SIU helps:

• Reduce exposure to health care fraud and increase actual recoveries.
• Streamline complex management processes.
• Ensure compliance with regulatory guidelines.
• Save time and money utilizing proven data mining and case tracking methods that deliver resolution.

VSIU Case Investigation and Additional Services

Enable your SIU to do more by tapping into our team of experts. Our team can assist with:

• Developing correspondence.
• Collaborating on FWA findings.
• Identifying potentially aberrant trends at the claim and provider level.
• Investigating cases and developing summary reports with associated claims detail.
• Medical records review.
• Pursuing and facilitating appeals where necessary.
• Coding validation.
• DRG/DRM audit and review.
• Payment policy consulting.
• Request and review of medical records.
• Pursue recoveries and facilitate appeals process where necessary.
• Coding validation by certified coder.
• DRG or DRM audit and review.
• Payment Policy Consulting.
• Medical records Review.
• Reporting.
For more information about LexisNexis® Virtual SIU™ call 866.396.7703 or visit www.lexisnexis.com/risk/healthcare