

# LexisNexis® Provider of Interest Score



Finding a needle  
in a haystack has  
never been easier.

As fraud schemes become more complex and waste and abuse become increasingly more prevalent, health insurance plans need new ways to look at an age old problem. This phenomenon has led to a focus on, and government mandate for, predictive modeling to reveal suspicious billing patterns across health care claims. Savings under this approach have been estimated at well over \$100 billion in the first 10 years of use for Medicare and Medicaid programs alone.

The fact is that, while valuable, business rules, in isolation, have some inherent limitations when applied to fraud prevention. For instance, the rules-based approach relies on investigators to “tell” the software what to look for through what is generally a manual process. Once the system “knows” what to target, it looks for indicators one at a time.

Predictive modeling, as employed by LexisNexis® Provider of Interest Score, utilizes statistical techniques to identify combinations of factors that should be analyzed as fraud, waste and abuse indicators. Scoring then prioritizes results, focusing on areas that have the highest probability of fraud, waste and abuse.

By drawing in more information and using it to focus on high-quality leads, LexisNexis Provider of Interest Score can not only identify aberrant patterns in provider behavior but also uncover indications of emerging fraudulent schemes.



## The Difference in Approaches

With the ability to look at multiple items at one time in a fully automated process, Provider of Interest Score quickly reveals billing that looks suspicious and can unveil far larger amounts of inappropriate claims with fewer false positives than those discovered with single-claim techniques.

### Provider of Interest Score:

- identifies providers with irregular diagnosis, treatment and billing patterns;
- highlights data points where the provider is an outlier from his/her peers; and
- augments data on identified providers with public records such as financial, criminal and medical-sanction derogatory information.

Based on this information, providers are assigned a three-digit score from 100 to 999, with the highest scores equating to higher indications of potential for fraud, waste and abuse, detection, prevention and recovery.

**The use of the resulting three-digit score assists in prioritization of providers that already may have been flagged by traditional rules, as well as those whose claims patterns and behavior are outside of the norm within their peer group.**

Provider of Interest Score also optimizes claims operations and lowers operational costs by accelerating needed investigations and fast-tracking valid claims.

## The LexisNexis Difference

Provider of Interest Score is unique in that it is fully integrated into the LexisNexis system, not an add-on or an afterthought. LexisNexis also has a long history with harmonizing analytics with the policies and workflows of its clients, thus constructing models to meet their specific needs.

To that end, LexisNexis customizes Provider of Interest Score for each organization, taking into account their individual policies and available resources. Models can be based on previously identified fraud, waste and abuse or built without identified problems. Custom models also can address factors such as differences in diagnosis and treatment patterns by geography.

Integration with LexisNexis Intelligent Investigator™ strengthens the predictive power of Provider of Interest Score with automation of queries from all data sources, types and lines of business in one place for faster, better, more efficient investigations.

LexisNexis analytic products integrate with the Medicaid Management Information System and adhere to Service-Oriented Architecture standards, minimizing the necessity for ongoing IT involvement while providing maximum speed and flexibility.

## For More Information

Call 800.869.0751 or visit  
[www.lexisnexis.com/risk/healthcare](http://www.lexisnexis.com/risk/healthcare)

### About LexisNexis® Risk Solutions

LexisNexis Risk Solutions ([www.lexisnexis.com/risk/](http://www.lexisnexis.com/risk/)) is a leader in providing essential information that helps customers across industries and government predict, assess and manage risk. Combining cutting-edge technology, unique data and advanced analytics, Risk Solutions provides products and services that address evolving client needs in the risk sector while upholding the highest standards of security and privacy. LexisNexis Risk Solutions is part of Reed Elsevier, a leading global provider of professional information solutions across a number of sectors.

Our health care solutions assist payers, providers and integrators with ensuring appropriate access to health care data and programs, enhancing disease management contact ratios, improving operational processes, and proactively combating fraud, waste and abuse across the continuum.



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