



# COB STRATEGIES THAT ACCELERATE VALUE

APRIL 30, 2024

11:00 A.M. – 12:00 P.M.



Innovative payment accuracy solutions that allow our customers to focus on what matters most—affordable, quality care and healthier lives

PERFORMANT



# WEBINAR LOGISTICS



## Interact

Use the **chat box** at anytime to connect and engage with peers



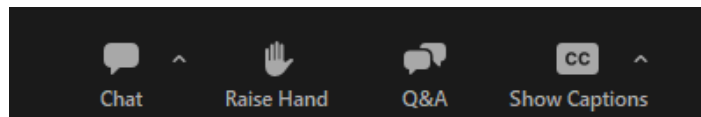
## Ask

Please be sure to place questions for our presenters in the **Q&A box**



## Watch

A **recording** of today's session and slides will be shared in the coming days





# TODAY'S PRESENTERS



**ALAN COULTER-LOGAN**  
VP, Business Development  
*Performant Healthcare Solutions*



**KENNETH PINGEL**  
Payment Integrity Value Oversight *Priority Health*



**JYOTI "JJ" JALALI, MPH**  
Director Member Data Sales  
*CAQH*



# PRIORITY HEALTH: BACKGROUND & GOALS



# BACKGROUND PH AS SPECTRUM TO COREWELL



In February 2022, Spectrum merged with Beaumont Health (based in metro Detroit) to create a new, statewide health system called Corewell Health.

2022



<1993

Priority Health was founded +30 years ago as part of the Spectrum Health System in Grand Rapids, MI by a group of physicians and hospitals who wanted to ensure that the community they served could afford access to quality care.



2024

Today, Priority Health is the third largest provider-sponsored health plan in the nation, proudly serving more than 1.3M members each year and offer a network that includes a broad network of primary care physicians in Michigan.



# MAKING MICHIGAN A PRIORITY

# 2

nd largest health plan in Michigan



Medicare + Medicaid + Group + Individual impacting more than 1 million lives a year

# Only Michigan health plan



to have **risk-sharing agreements** with providers within all segments

# 1

st health plan in the country



to launch a virtual-first health plan in the individual market



Nearly **90 cents** of every dollar is spent on the care of our members

# 1

st health plan in Michigan



to incentivize social determinants of health data tracking



# VISION FOR PAYMENT INTEGRITY AT PRIORITY HEALTH



## COMPLIANCE

Operate in full compliance with provider contracts and government regulations:

- Pay all claims correctly the first time
- Manage claim operations end-to-end
- Ensure rules applied are consistent and current
- Appreciate and respect provider stakeholder views of Priority Health rules and practices
- Teach providers to bill correctly using incentives where feasible



## DATA USAGE

Use data to drive decisions:

- Make risk assessment a routine part of business review when making claim processing outcome decisions
- Measure progress in payment integrity effectiveness as part of corporate cost controls
- Relate payment integrity outcomes to utilization patterns, cost trends, medical practice trends, and other industry economics



## FOCUS ON PAYMENT INTEGRITY

Our goal is for Priority Health to pay claims correctly the first time, detecting billing errors prior to outcome determination.

- During the past two years, Priority recognized opportunities for program improvement and recorded a significant increase in year-over-year savings in 2022 and 2023
- Breaking down internal barriers, empowering our teams to work differently, and maintaining strong vendor relationships were key factors in exceeding our goals
- COB was an area with growth opportunity and has seen rapid improvement due to our strategic partnership with Performant and CAQH
- Performant and CAQH have helped us answer the most important question pertaining to claim adjudication—“Is this our responsibility?”





# PERFORMANT: BREAKING DOWN DATA SILOS



# PERFORMANT HAS BEEN IN YOUR SEAT

# 81.6M

Business owners for three of the largest COB programs in the country now call Performant “home”. These leaders represent 81.6M lives that have been fully functional within the CAQH COB Solution® solution for years.



ANNA DARNELL  
UnitedHealthcare



ALAN COULTER-LOGAN  
UnitedHealthcare



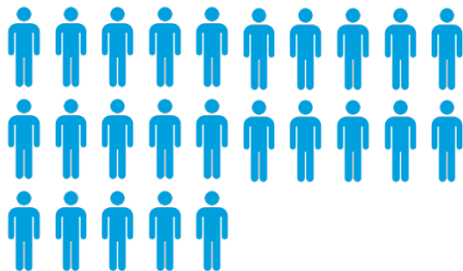
AMANDA PURVIS  
Aetna



COREY HOSTETLER  
Kaiser Permanente



# DATA EXPERTISE



## 250M

Performant's proprietary data assets account for approximately 125M lives for purposes of MCO cost containment and recovery.



## \$130M

Specialization in Rx PBM data has resulted in +90% of covered lives in the American healthcare market, resulting in \$130M in recoveries from Rx claims alone from 2022-23.



## PERFORMANT IS THE CHOSEN PARTNER IN CMS COB



CMS has selected Performant as its chosen COB partner for health insurer-related Medicare secondary payer debts.

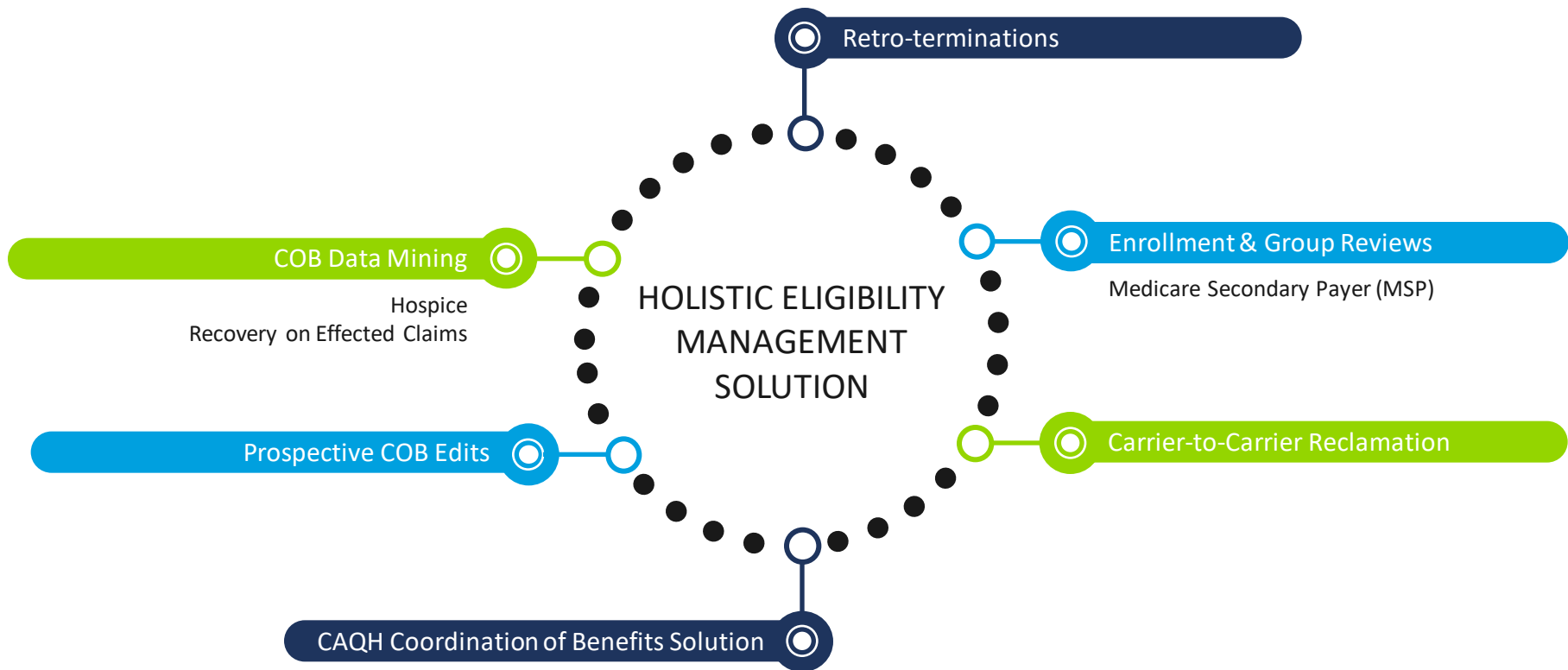
# \$253.17M

For FY 2021, CMS reports that GHPs and NGHPs returned \$298.91M true recoveries and increased the Medicare Trust Funds by netting \$253.17M after administrative costs were considered.

Source: The Medicare Secondary Payer Commercial Repayment Center in Fiscal Year 2022: Report to Congress as Required by 1893(h) of the Social Security Act for FY 2022, dated 12 April 2023.



# END-TO-END ELIGIBILITY MANAGEMENT





# BRIDGING MEMBERSHIP, COMPLIANCE & PAYMENT INTEGRITY

	COB Data Mining	COB 360 <sup>SM</sup>	COB Plus <sup>SM</sup>
Marry and manage member, group, and claims data	●	●	●
Analyze eligibility, paid claims, group demographics, and in-house data to identify claim primacy	●	●	●
Validate member data and address nuanced COB rules and regulations	●	●	●
Use Section 111 data and query-only/HEW files to extract maximum value from all eligibility data sources		●	●
Maximize identification of commercial insurance overlaps from CAQH COB Solution coverage information <sup>1</sup>		●	●
Provide access to the CAQH COB Solution, the only national commercial COB database from CAQH			●
Build and manage required weekly CAQH COB Solution file extract			●
Update and respond to exception files received from the CAQH COB Solution operations			●
Manage the Member Data Portal and incoming queries			●
Absorb some (in certain cases all) CAQH COB Solution maintenance costs and ongoing licensing fees <sup>2</sup>			●

<sup>1</sup> Only applicable if the plan has already implemented CAQH COB Solution.

<sup>2</sup> These costs are factored into Performant's contingency fees.

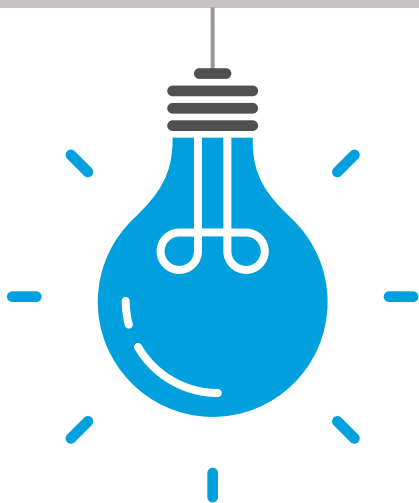
## FAST FACTS

*Alleviate COB pain points and drive results with an end-to-end solution that offers an average \$1M boost in savings within the first few months.*

- Centralizes available membership data
- Maximizes savings across all lines of business
- Customizable for “special” groups or membership buckets
- Enhance business segment and stakeholder communications through additional services



## STRATEGY WORKS NATIONALLY & REGIONALLY



Southern Blues plan achieved **\$4M** in recovery in less than 90 days (June to August) on an established COB program.



National plan with 7M lives achieved **\$7.7M** in 2023 (through August) with 3<sup>rd</sup> pass data mining.



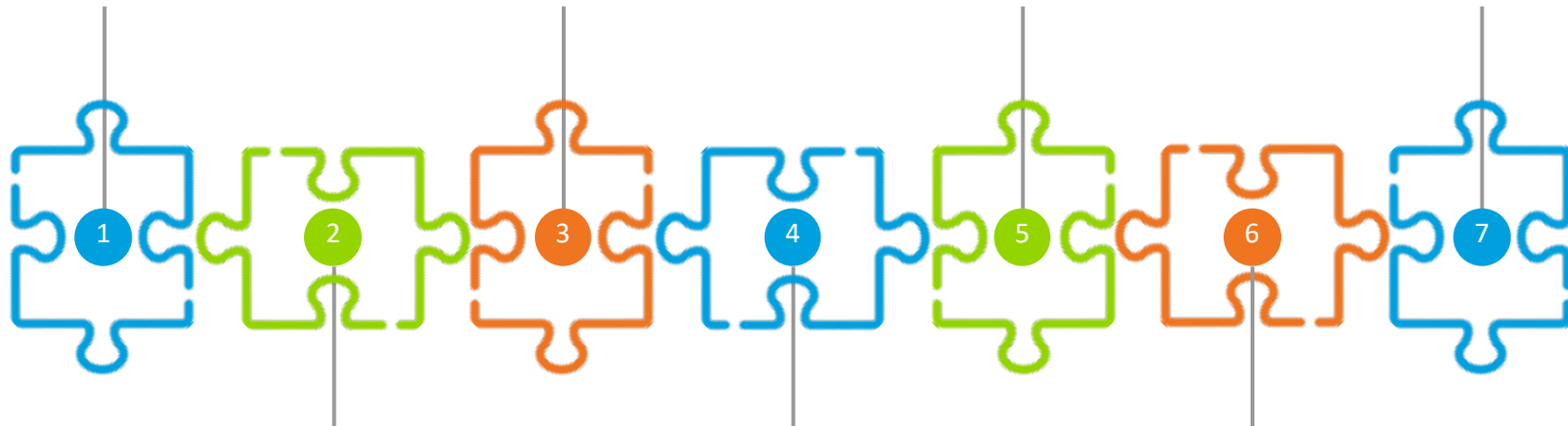
# BRINGING THE PIECES TOGETHER

Join expertise early in the process **before** implementation.

Plan for and join all necessary data from respective silos.

Staff up (or partner) well in advance of go-live.

Enhance and revisit for efficiencies while increasing ROI.



Data field and adjudication system analysis; planning while contracting finalized.

Test, test, and test again.

Avoid garbage in, garbage out.

Count end-to-end savings...and make them **real** savings, not estimates.





# IMPLEMENTATION MILESTONES: COB DATA MINING/CAQH



First claims and other insurance identification files delivered

11/15/2022



First COB-DM membership add update and claims finding file with CAQH results delivered

2/21/2023



Program in full production/ongoing support continued

7/10/2023

9/13/2022

SOW executed



2/3/2023

First membership production data to CAQH for processing



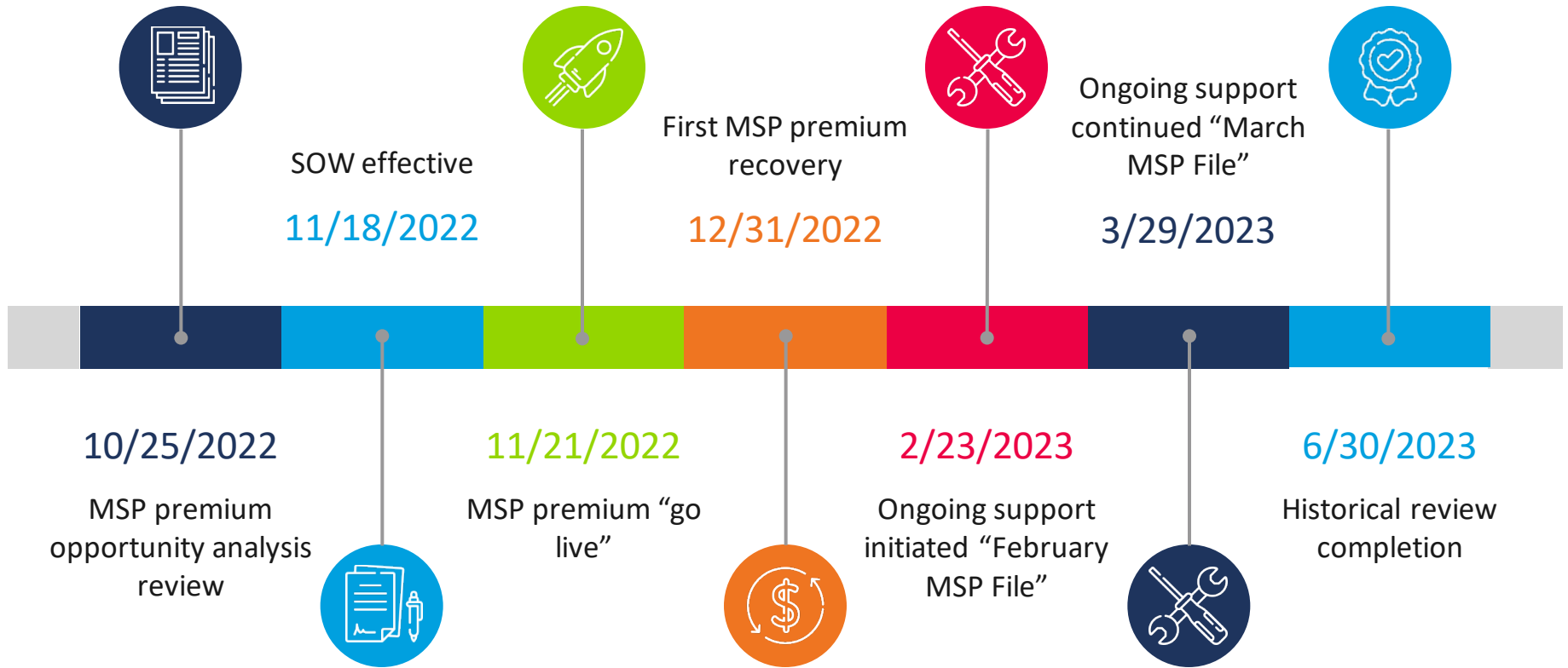
5/2/2023

QA/waterfall reporting: manual report generation and delivery



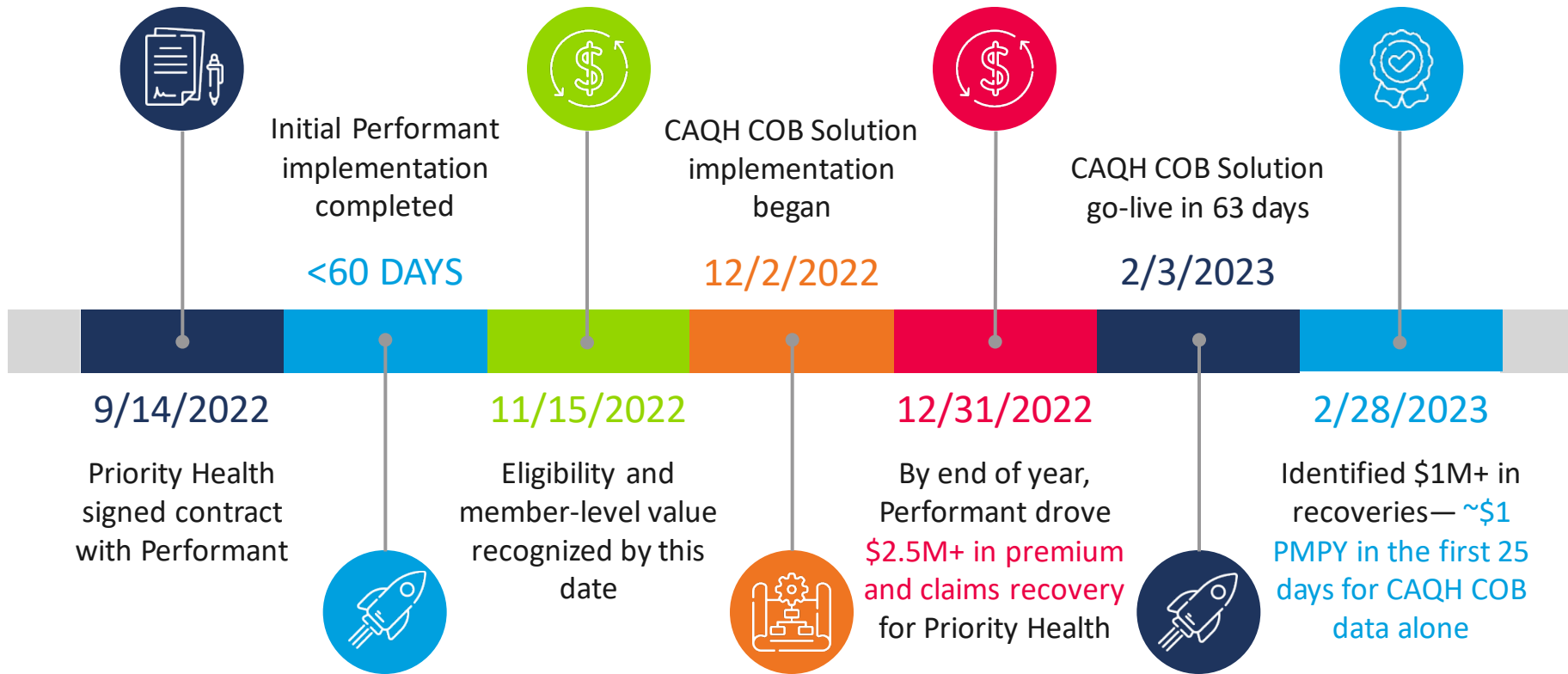


# IMPLEMENTATION MILESTONES: MSP PREMIUM





# REAL RESULTS IN RECORD TIME





## UP NEXT: PROSPECTIVE SAVINGS REPORT DESIGN



CFOs respond to real, cold cash savings—traditionally recognized by recovery in the post-pay space.



Capturing source of the COB information to know how “siloes” data works—how the puzzle pieces fit.



Building metrics and methodologies that will be recognized by actuaries and other finance stakeholders.



Prospective becomes the largest payment integrity program—reflective of the most established and mature programs in the industry.



IF YOU HAVE QUESTIONS...

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