In this period of dramatic change in healthcare, your organization can gain a major competitive advantage by reducing overpayments. We are a leading provider of overpayment recovery services that deliver increased savings and bottom-line results to you.

Our Coordination of Benefits (COB) services identify and recover benefits paid where Medicare or another payer should have been the primary payer. Our team goes to great lengths to identify overpayments, proactively reduce payment leakage, and improve member satisfaction for our clients and their members. Our solution is designed to complement not compete with your internal COB efforts.

**Prepayment Investigation**

The majority of overpaid claims are due to incomplete or incorrect information regarding a member’s work status. Don’t wait until claims are overpaid to accurately determine the order of benefits.

Our prepayment investigation provides regular work status checks of all known Medicare entitled members, which allows you to know with confidence at the time of payment, the correct order of benefits.

**Our Payment Integrity Solutions Group**

- 25+ years of experience (through acquisition of Primax Recoveries)
- More than $300 million recovered annually
- 100+ payer organizations supported
- 600+ recovery services employees

**Our Clients**

We help all health plans, payers, and administrators with recovery rights including commercial payers, BCBS plans, HMOs, MCOs and self-funded employers.
Accurate Entitlement Reporting
With the right focus, the Centers for Medicare and Medicaid Services (CMS) required data sharing can be a powerful tool. The new challenge for health plans reporting entitlement information to Medicare is to look beyond basic Section 111 compliance and consider the impact sharing such data can have. By providing entitlement data, you may help reduce Medicare’s potential for overpayment while at the same time, increasing your risk of underpaying claims.

Our process ensures that you are getting the most out of Section 111 mandated reporting by providing:

• Timely and accurate primacy determinations
• Updates to the Common Working File
• Maintenance of primacy records in your eligibility system
• Accurate MSP and non-MSP reporting

Our Advantages
• Positive provider relationships
• Experienced in working with the CMS coordination of benefits contractor (COBC) to ensure primacy records are accurate
• Cost avoidance savings from accurate MSP/ NMSP reporting to CMS
• Options for updating your system with COB information
• Exceptional pricing and recovery results

About Conduent
Conduent is the world’s largest provider of diversified business process services with leading capabilities in transaction processing, automation, analytics and constituent experience. We work with both government and commercial customers in assisting them to deliver quality services to the people they serve.

We manage interactions with patients and the insured for a significant portion of the U.S. healthcare industry. We’re the customer interface for large segments of the technology industry. And, we’re the operational and processing partner of choice for public transportation systems around the world.

Whether it’s digital payments, claims processing, benefit administration, automated tolling, customer care or distributed learning – Conduent manages and modernizes these interactions to create value for both our clients and their constituents.

Learn more at www.conduent.com.

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