

# Strengthen the Accuracy of Your Premium Payments

Ensure monthly premiums reflect accurate eligibility and enrollment data, reducing financial and compliance exposure.

Premium payment evaluations offer a significant opportunity for health plans:

## Capture Six-year Lookback

Health plans can reconcile most premium mispayments for the current year and up to six years prior.

## Increase Revenue


Properly classified member statuses can lead to significant capitation payment adjustments.

## Achieve Ongoing Revenue Accuracy

Monthly monitoring ensures complete and accurate premium revenues year round, as well as sustained compliance with CMS guidelines.

## Mitigate Compliance Risk

Correctly documenting Medicare Secondary Payer versus Primary ensures plans remain compliant with CMS.

revenue 

**\$120M+**

in client recoveries, to date

**Pareto RevenueIQ** for premium integrity helps payers navigate Medicare Secondary Payer (MSP), End Stage Renal Disease (ESRD), Dual Eligibility and other reporting complexities between CMS and payers to recoup underpaid capitation payments and mitigate compliance risk.

## MSP Validation

Uncover and correct inaccuracies in the Section 111 information reported to CMS to validate Medicare primacy status.

## ESRD Entitlement

Reconcile inconsistencies in data between the MMR and claims data to properly classify ESRD status and recover appropriate payments for those members.

## Dual Eligibility

Identify, engage, and enroll dual eligible beneficiaries to capture complete and accurate reimbursement.

Our proven process efficiently reconciles Medicare data inconsistencies and quickly diagnoses if a recovery opportunity or compliance concern exists.

### Payment Reconciliation

Advanced analytics to evaluate and identify status inconsistencies.

### Outreach & Validation

Prioritization of recoveries and execution of outreach to confirm member status.

### Reconciliation & Updates

ECRS updates, reconciliation with providers, and enrollment/recertification to correct MSP, ESRD, and Dual Eligible status.

### Ongoing Monthly Recoveries

Secure, web-based platform with prioritized work queues and performance tracking to proactively prevent recurring issues and maintain ongoing compliance.

### Proprietary Algorithms

Leverage clinical (e.g., claims, medical procedures, sequence of diagnosis and procedures, medications) and non-clinical (e.g., demographics, enrollment, location of care) data to identify and predict status with up to 95% accuracy on average.

## Why Pareto Intelligence

### Data Driven

We apply advanced data science and complex business rules to identify premium discrepancies.

### Compliant Procedures

We look both ways to recover underpayments and identify overpayments to mitigate compliance concerns.

### Independent Review

We provide a third-party evaluation of internal or vendor-led performance.

## Our Experience

**5:1 ROI**

average across all clients

**20+**

years supporting health plans with government programs

**40+**

health plans engaged in premium- and payment related projects

**5K to 2M**

member populations we've analyzed

Up to

**\$55**

recovered per member

**2**

weeks to deliver actionable insights