



Take a Prospective Approach to Payment Integrity

Prevent Overpayments and Maximize Savings

A proactive strategy to coordination of benefits (COB) can improve a health plan's bottom line. Access to timely and accurate COB data is the foundation of a higher standard of payment integrity and drives savings upstream.

The CAQH Coordination of Benefits solution leverages a continuously updated registry of coverage information on more than 225 million covered lives to determine primacy weekly—before claims are paid. Access to member coverage data before a claim is paid enables greater payment accuracy, provides a better member and provider experience, and streamlines health plan operations.

Achieve Better Results More Quickly and at a Lower Cost

Secure access to timely COB data allows plans to significantly enhance their PI program by eliminating the need to “pay and chase,” which often results in both provider and member abrasion. On average, health plans see a **10:1 ROI** using the HITRUST certified CAQH COB solution by reducing expenses associated with member canvassing, claims denials, resubmissions, and recovery.

The Results

10:1

Average reported ROI for health plans

99.5%

Accuracy of validated coverage overlaps

31%

Average increase in secondary coverage identification

Enhance Payment Integrity

To meet cost-reduction targets, health plans need to efficiently manage end-to-end claims processing and improve both pre- and post-pay savings goals. With access to a continuously refreshed registry of member data that is updated weekly by every national health plan, payers can:

- Minimize overpayments and avoid costly re-work
- Reduce COB costs per member
- Review historical files to verify alternative past primary coverage
- Leverage automated data validation to decrease manual review
- Improve vendor productivity
- Enhance the member and provider experience with more accurate claims processing

Remove Members from the Middle with Direct Plan-to-plan Communication

The Member Data Portal improves COB coverage accuracy through secure and direct communication with other plans to eliminate the need for member input. Health plans can:

- Search for individual member coverage and COB information
- Easily update member details
- Manage and submit inquiries to other payers for faster COB resolution
- Reduce member mailings
- Clarify effective and term date discrepancies

Navigate High Drug Costs and Low Recovery Rates

Though often disregarded, coordinating pharmacy benefits can yield substantial savings opportunities and lead to an improved experience for members if executed correctly. The combination of high drug costs and low recovery rates compared to medical COB, means prioritizing pharmacy COB should be a key focus. The point-of-sale aspect further complicates recovery efforts and increases the risk of upsetting members through incorrect denials or overcharges. Utilizing proactive pharmacy coverage data within the health plan's system or sharing validated COB reports directly with Pharmacy Benefits Managers (PBMs) ensures accurate payment of pharmacy claims from the outset and reduces member abrasion.



43M

covered
pharmacy lives



>50%

of national health plans
participating



52%+

determined
primacy rate



Access Immediate, Actionable Data

To improve payment accuracy, plans need access to validated coverage information they can trust. The CAQH COB solution performs matching logic that uncovers and validates overlaps to identify primacy determinations for both medical and pharmacy coverage. A weekly file is delivered with coverage information that has undergone validation against every health plan's source of truth to uncover inconsistencies in the member data. This allows plans to automate data ingestion and accurately avoid

incorrect payments. Plans can deny claims based on primacy or use the data to look back and identify claims paid incorrectly.

“Obtaining COB data is the easy part, applying, maintaining and refreshing the data is what’s hard and that’s where the weekly COB file from CAQH comes in”

– Jake Hartberger, AVP Payment Integrity, Molina Healthcare
