

## GET UNIQUE INSIGHTS INTO EACH GROUP, PLAN AND NETWORK AND ENGAGE WITH THEM TO BRING DOWN HEALTHCARE COSTS

Network Scope gives you AI-connected insights and comparative behavior analysis for each healthcare group, plan, hospital, pharmacy, dental practice, and provider in your network. With the unique Codoxo AI product insights your network teams will have the comparative coding behavior data you need in contract negotiations to bring down long-term costs.

## Saving millions at world-class insurance companies and healthcare agencies including:

### Highmark Inc.

6+ million members

### Pacific Health Plan

700K + members

### State Medicaid Agency

1.5+ million recipients

### Mid-State Health Plan

3.5 million members

### Southeast Health Plan

3.5 million members

### Midwest Plan

2.5 million members

## NETWORK SCOPE IS POPULAR WITH NETWORK TEAMS AND CHIEF MEDICAL OFFICERS AT MAJOR HEALTHCARE COMPANIES AND AGENCIES IN NORTH AMERICA. IT INCLUDES:

**CODOXO FORENSIC AI PLATFORM ANALYZES CLAIMS, CLAIM LINES, MEDICAL CODE USAGE AND PROVIDER-LEVEL BEHAVIOR** to give your network team insights into the collective behavior of providers and billing teams at each group, facility, pharmacy and dental practice.

**GROUP-TO-GROUP COMPARATIVE DASHBOARDS** make it easy to see how the treatment plans and billing practices are similar or different between groups.

**NEGOTIATION PLAYBOOKS** are pre-populated with the provider-specific cost information and behavior, as well as group-level comparisons to their five most similar groups in your network. connections between providers or entities.

**AI-BASED RISK SCORES** flag groups with higher-than-average costs and claim patterns than their peers.

**PROVIDER WATCHLIST REPORT** shows you the groups with providers associated with recent FWA schemes, or with coding practices that fall outside the norm of their peers. Detailed explanations for the provider integrity score are available with the Fraud Scope application.

**OUTLIER PROVIDER REPORTS** give you a list of providers within a group with lower Provider Integrity Scores than their peers so that network teams can work with the group to address the coding behavior of the individual provider(s).

**EASY-TO-USE REPORTS AND QUERIES** let anyone on your network team find and research issues across groups – without any help from IT.

**ANALYZE RISK-BASED CONTRACTS** analyze risk-based contracts and understand how they are performing compared to their peers.

**STREAMLINE CONTRACT NEGOTIATIONS** with built-in workflow for the ongoing network contracting process.

**PRESCRIPTIVE INSIGHTS** for contract negotiation based on usage.

# All-in-One Forensic AI Platform

Holistic. Transparent. Collaborative. Codoxo delivers a complete suite of solutions delivered on one AI platform, enabling users across the entire payment spectrum to collaborate and gain visibility and transparency, all on the same claims data. Users across cost containment departments will have a unified view that eliminates gaps, creates efficiencies, builds connections across your data, and provides more transparent, actionable analytics.

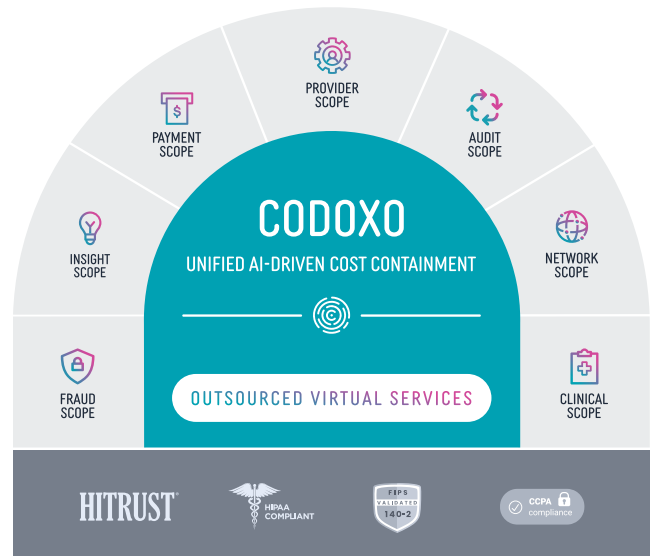
**ALL LEVELS OF BEHAVIOR-BASED ANALYSIS:** Analyzes professional, facility, pharmacy, behavioral, dental, and workers comp claims and identifies behavior patterns at every level – from individual claims and providers up through groups, networks and plans.

**PRESCRIPTIVE INSIGHTS:** AI measures and gathers your data to generate actionable insights that help teams prioritize, influence behavior, and act quickly when there is a problem.

**ADVANCED DETECTION ENGINE:** Our proprietary algorithm uses a combination of rules and artificial intelligence to identify new problems and outlier behavior earlier than traditional techniques.

**ALL CLAIM TYPES:** Codoxo can ingest and analyze all professional, pharmaceutical, facility, behavioral, dental, and workers comp claims.

**ALL CODES:** Our proprietary AI technology has the ability to identify issues and opportunities that may arise from complex claims and codes in addition to the standard ones which helps discover a wider range of existing and emerging problems.



*“We were able to get up and running with the Codoxo AI-based solution in 3-5 months, compared to a year with previous partners.”*

- J.R. Trevino, Manager, Special Investigations Unit DRISCOLL HEALTH PLAN

## The Codoxo Healthcare Integrity Suite

We’ve built a full set of applications that help deliver upon our mission to make the healthcare system more affordable and effective for everyone. We achieve this through our AI-based platform that drives actionable insights across our Healthcare Integrity suite of solutions. These insights expose opportunities for behavior change that impact cost outcomes.

### PAYMENT SCOPE

Proactively flags problematic claims and gives analysts an easy way to follow up with pre-pay intelligence, easy-to-use claim workflow, automated outreach for more information.

### INSIGHT SCOPE

Gives everyone across the health plan an easy way to research issues with self-service reporting and querying of claim, provider, facility and member behavior.

### AUDIT SCOPE

Audit Scope provides seamless integration of detection, selection, audit creation, tracking and reporting of audits across all pre-pay and post-pay functions.

### CLINICAL SCOPE

Accelerates pre-authorization approvals for providers with strong integrity scores and flags requests that need a closer look based on recent provider behavior or emerging FWA schemes.

### PROVIDER SCOPE

Compares each provider’s claims and coding practices to their peers, identifies outlier behavior, and proactively engages providers to improve claim integrity and bring down pre-claim costs with a provider self-monitoring and communication portal.

### FRAUD SCOPE

Automatically detects new and emerging fraud schemes, streamlines collection of evidence chains, and gives SIU teams integrated case workflow for the investigations you choose to pursue.

**1 billion**

Claims processed by AI

**\$500 Million**

Identified savings by Codoxo

**93%**

Reduction in false positives

**72%**

Increase in productivity



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