



Conditional Payments

Pay what you owe—and nothing more



Insurance Automation

From Policy through Claim

- AI, machine learning, and predictive analytics increases speed and precision
- 19 petabytes of data across proprietary databases yields greater accuracy
- Ecosystem of integrated solutions improves customer experience – yours and theirs
- 5,000+ industry experts provides lift across the value chain
- 50+ years safeguarding insurers' data earns confidence

Gain a strong advocate in Medicare disputes to eliminate risk and exposure

The stakes are high when dealing with Medicare conditional payments. With the right advocate, you can save money, mitigate exposure, and ensure resolution of claims. As an industry leader, we are uniquely positioned to ensure proper compliance with CMS's Medicare Secondary Payer (MSP) contractors for all lines of business while also delivering maximum cost and time savings.

We have cost mitigation down to a science

Section 111 mandatory insurer reporting gives the Medicare program an unprecedented amount of information on your claims. Using that information, Medicare's contractors have a direct right of recovery, which can be aggressively pursued by U.S. Treasury collection and federal lawsuits for double damages in addition to letters for recovery requests. When payment dates slip by, interest will accrue.

We can help you develop a comprehensive approach to mitigate liability and reduce costs. When we dispute payments, we successfully receive reductions **97 percent** of the time.

Over \$250M

Conditional payment program savings in reduced Medicare liens for 2020 - 2021.

A comprehensive approach to mitigate liability and reduce costs

We employ a unique approach to the entire conditional payment process that's unparalleled in service, precision, and value. Our holistic view of all aspects of Medicare Secondary Payer compliance always encompasses the whole claim. With our Conditional Payment Services, you receive the benefits of:

- Less guesswork: With two different contractors and constantly changing rules, the Centers for Medicare and Medicaid Services presents burdensome challenges now more than ever. That's why it's never been more important to rely on a reporting service that expertly handles compliance activities.
- Reduced costs: Over the past two years, our conditional payment dispute efforts yielded over **\$250 million** in savings.



Investigation



Negotiation



Savings

Get your complimentary consultation

To learn more about Conditional Payment Services, please click here or contact:

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verisk.com/cp-recovery-services

