



Could you do more to safeguard Medicaid dollars?

For decades, Public Consulting Group (PCG) has helped Medicaid agency and commercial partners maintain integrity and accountability in their programs.

Program Integrity (PI) operational excellence is our priority. Our team of 174+ PI professionals hold comprehensive experience across all PI functional areas and help you effectively leverage new technologies, apply innovative approaches to detect Fraud, Waste and Abuse (FWA), prevent improper payments, and improve program outcomes.

PCG's Value: Return on Investment (ROI)

By increasing fraud detection and prevention efforts, our clients improve program outcomes through increased recoveries, measurable cost avoidance, and provider behavior change.

Across the nation, PCG has:

- Identified over \$116 million in Medicaid pre-payment denials since 2016.
- Generated a lifetime 2100 percent ROI in one state.
- Increased FY23 program savings by 25.8M for one state program.
- Demonstrated a 10 percent change in provider behavior.





As a Centers for Medicare and Medicaid (CMS)-Certified Quality Improvement Organization-like (QIO-like) Entity, **states are eligible for 75 percent enhanced federal financial participation on medical and utilization reviews conducted by PCG.**

Program Integrity Managed Support Services

PCG's Proven Approach

Our PI managed support solution provides Medicaid agencies with the following staff and services:



Medical Record Reviews

Our team of multi-disciplinary clinicians and experts perform pre- and post-pay medical records reviews to identify FWA and support recovery efforts.



Targeted Service Area Initiatives

PCG's PI subject matter experts (SMEs) propose and execute targeted provider analyses and medical record review projects designed to identify emerging areas of FWA and change future provider behavior.



Compliance Investigations

Our team reviews provider records for regulatory compliance, which can result in denial of payments and increase future provider compliance—translating into quantifiable cost avoidance.



Provider Enrollment and Oversight

PCG's provider enrollment and oversight approach supports the comprehensive needs of the provider network, ensuring that Medicaid members receive high-quality care from well qualified providers. We monitor provider behavior and offer the education, training, and support providers need to maintain compliance with state and federal regulations and payment policies.



Data Analytics

Our SMEs and data scientists conduct service-area payment policy research, audit planning, and exposure analysis to identify FWA. Our experience spans numerous platforms and programming languages and supports the development and implementation of pre- and post-pay algorithms for both real-time and retrospective claim reviews.



Incident Management

PCG's experts help you protect vulnerable populations by leveraging claims data to unearth and investigate undetected abuse, neglect, theft, fraud, and other problems related to delivery of care.



FWA Triage

Our PI team helps our clients understand and prioritize FWA leads generated from analytics systems, ensuring that investigative and recovery resources are spent on highest-ROI activities.



Increased Agency Cost Avoidance and Recovery Opportunities

Ready to take your Program Integrity efforts to the next level? Contact us today to learn how our team can increase your program's efficacy and help you capitalize on cost avoidance and recovery opportunities.





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