



## Strengthening Your Data Analytics Skills & Techniques

Sessions are presented live and scheduled in Eastern Time. We will use Adobe Connect to present the sessions. Participants must attend at least 7 sessions to earn credit for attending.

### Tuesday, March 22

11:00 am – 11:15 am      **Welcome & Program Introduction**

11:15 am – 12:15 pm      **Techniques to Build Cases**

Understand how this team utilizes cross-department collaboration and teamwork to build cases. From data mining applications, to flagging aberrant behavior and drilling down into the data, supporting ad hoc requests, and SIU referrals, hear how analytics can drive cases.

Sarah Essing  
Associate Director, Fraud, Research, Analytics & Concept, Humana

Andrew Berry  
Associate Director, Business Intelligence, Humana

12:30 pm – 1:30 pm      **The Bell Curve & Outliers, or Success via Basic Statistics**

Discuss how groupings, such as geographical area, specialty providers, diagnosis, etc., may be used in conjunction with basic statistical techniques to identify fraud concerns. Explore this concept through a case study that included 1.8 million in restitution.

James Wilson  
Analytics & Reporting Consultant, Blue Cross Blue Shield of Texas (HCSC)

2:30 pm – 3:30 pm      **Time Series Analytics: Identify Potential Fraud Trends as They Begin to Emerge**

This presentation features a creative method that analyzes time series data to generate a list of recent statistically significant procedure code spikes. Best practices for preparing time series claims data, generating forecasts based on historical time increments, and accounting for seasonal healthcare trends are examined.

Andrea McLain | Business Analytics Advisor, Cigna

**Agenda was last updated: 3/2/2022**

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3:45 pm - 4:45 pm

### **Dashboarding for Targeted Fraud Schemes**

This presentation will address one way to use Excel as a powerhouse reporting tool to enable lead generation and validation for specific schemes. Explore dashboards built around two schemes from concept to launch. Gain meaningful, actionable insights as well as discuss the importance of collaboration between various SIU functions, including Clinical Nurses.

Shveta Agarwal, CFE  
SIU Consultant, Florida Blue

Lisa Reavis, CPC  
SIU Senior Business Analyst, Florida Blue

## **Wednesday, March 23**

11:30 am – 12:30 pm

### **Networking Hour via WebEx**

1:30 pm – 2:30 pm

### **Predicting the Future: Preparing Your PI Program for 2022 and Beyond**

COVID-19 is currently creating an urgency around FWA detection and prevention among payers and vendors. Whether it's setting more edits to stop wasteful or abusive telehealth claims or rooting out testing and vaccination fraud. But that trend will pass, and the industry will move on. How do we leverage what we learned from the past 1.5 years to create successful prevention plans for 2022 and beyond in other non-COVID areas? What levers do we need to pull to ensure that we're more accurately predicting other types of FWA? In this session, we will discuss 2020 billing trends and how to use consistent, agile analysis techniques to stay ahead of future schemes. Participants will learn how to conduct effective retrospective analysis for identifying potential gaps that arose during the COVID-19 pandemic and how to apply the lessons learned to more real time prevention of FWA.

Erin Rutzler, AHFI, CFE, CPC  
Vice President, Fraud, Waste and Abuse, Cotiviti, Inc.

Ryan Cleverly, AHFI, CSPO, MCS,  
Product Director, Fraud, Waste and Abuse, Cotiviti, Inc.

2:45 pm - 3:45 pm

### **Practical Data-Driven Investigations**

Examine a practical framework for conducting data-driven investigations by leveraging claims data to identify red flags, spot fraudsters, and disrupt costly

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false billing schemes. Consider how multidisciplinary teams of investigators, auditors, and analysts can answer real-world questions through data analysis.

The presentation will feature examples from a variety of provider types, including non-emergency transportation and in-home service providers. At the end of the program, participants will understand how to use data to drive investigations by detecting fraud schemes, identifying witnesses, crafting document requests, calculating overpayments, and implementing claim edits.

Eric Panicucci, MSCJ, CFE  
Special Agent, U.S. Dept. of Health and Human Services - OIG

4:00 pm – 5:00 pm

### **Leveraging Data Analytics to Identify and Mitigate Program Vulnerabilities - Allergen Immunotherapy (AIT) Preparation**

SIUs and other departments investigating Fraud, Waste, and Abuse often focus on the post-payment review of specific providers based upon aberrancies or policy violations identified during data analysis. But are they fully exploring ways to close the program gaps identified during those audits? Join us in this session to learn how vulnerabilities identified during post-payment investigations and medical reviews can lead to pre-payment solutions that more effectively enforce policy at the claim transaction level, and even highlight areas where vague or inconsistent policies may be strengthened and streamlined to enable those solutions. The Trusted Third Party, on behalf of the Healthcare Fraud Prevention Partnership, will review recent analytics surrounding Allergy Immunotherapy Serum Preparation as an example of how this data analysis process can inform pre-payment strategies to mitigate Fraud, Waste, and Abuse proactively. Allergy Immunotherapy (AIT) is used to reduce patients' reactions to allergens by injecting them with small amounts of the allergen over time so that their body can build up resistance to the allergens. Before the injections can occur, a provider first prepares the serum and bills for the that preparation using procedure code 95165. Since this code indicates the number of units that the provider intends to inject, the code itself ends up being very problematic and lends itself to being abused by bad actors. This code has been the subject of many fraud, waste, and abuse cases, and it has been difficult for payers to combat this abuse, as abusive providers have figured out several ways to get around edits. The TTP will review a tool that was recently developed as an example of data-driven decision support that allows payers to make an informed decision as to whether an edit is right for them and if so, at what threshold.

Ben Denny  
Data Scientist, Healthcare Fraud Prevention Partnership, Trusted Third Party

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## **Thursday, March 24**

1:30 pm – 2:30 pm

### **Best Practices for Building SIU Dashboards for Reporting**

In this session we'll discuss how having good reporting to demonstrate the value of your SIU intervention is key to growing your SIU footprint. How do you summarize data to define metrics on a dashboard for reporting? Considering your audience and defining the Key Performance Indicators can be critical to getting to the heart of your design. What are some visual best practices to consider?

Nisar Ahmed  
Senior Analytics Consultant, Aetna CVS Health

Tyanne Ryan  
Director, Performance Management and New Programs, Aetna CVS Health

2:45 pm – 3:45 pm

### **Elevating How You Communicate and Present Data by Giving Your Internal Clients Everything They Didn't Know They Needed**

As data experts, analysts may shy away from communicating with their internal clients and providing more than what was on the original request. In this presentation, we cover why a mindset shift will make your job easier. Stop the guessing games! We'll provide parameters for data presentation, which, like it or not, can be integral to information acceptance. Aiming to exceed expectations of the requester and using your expertise to take the next step is the secret sauce.

Jessica Gay, AHFI, CPC, CFE  
Vice President, Integrity Advantage

Michelle Rua, PSM  
Investigations and Analytics Consultant, Integrity Advantage

4:00 pm – 5:00 pm

### **Fraud Research and Datamining Dashboards**

This presentation will cover the ins and outs of Power BI as a visualization tool. Explore how to leverage Power BI to build out data mining and research tools to assist in the identification of potential suspicious provider billing behavior that may lead to referrals for further investigation.

Jeff Wickwire  
Senior Data Visualization Engineer, Data Analytics, Humana

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