



## Are the complexities of genetic testing claims overwhelming your plan, making it difficult to control costs?

Many health plans struggle to navigate the intricacies of genetic tests, which are complicated by increased popularity, volume of available tests, demand for extensive policy coverage updates, and timely evaluation and payment of claims. A strategy that includes increased oversight to ensure appropriateness and validity of genetic testing helps mitigate the risk of payment errors and billing abuse, but most plans cannot accomplish this alone.

With more than 40 years of experience, including partnerships with national and regional health plans, as well as CMS for RAC Regions 1 and 5, Performant offers a wide range of complex (clinical) audit solutions. Performant provides health plans with guidance to gain control over evaluating genetic testing claims and facilitates the return of overpayments made to providers for unnecessary tests and tests not approved by plan policy.

Performant's expert team of registered nurses, certified coders, claims auditors, and analysts, working under medical director oversight, ensures genetic tests are clinically valid and correctly billed, and overpayments are identified for recovery. We perform a review of medical records and other source documentation for each claim, prepare findings, and validate the presence of inaccurate billing and overpayments, enabling the plan to recoup lost capital.

## At a Glance

### The Problem

- Approximately 75,000 genetic tests in more than 10,000 unique categories exist today with nearly 10 new tests added daily
- Increased demand for testing has resulted in backlog and skepticism about covering tests based on physician recommendations
- Gray areas in clinical use create difficulty in quickly determining the clinical validity of tests

### The Solution

- Leverage the knowledge of a dedicated provider audit team expert in determining clinical validity of genetic tests
- Deploy a targeted strategy to increase oversight and accurately determine reimbursement for tests
- Capitalize on staff expertise to identify overpayments or billing errors to control plan costs and recover improper payments to providers

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## Practical Application

The objective of Performant's complex claim audit is to identify the exact genetic test performed to determine test appropriateness and plan responsibility.

# GETTING RESULTS



Performant's complex (clinical) claim audit workflow offers customization at key steps to ensure our program best integrates with the plan's existing audit process.



For more information on our complex and genetic testing audits, visit <https://www.performantcorp.com> or contact us at [healthcare.info@performantcorp.com](mailto:healthcare.info@performantcorp.com).