

## FINANCIAL REVIEW

- Ingredient cost algorithms
- Discount guarantees
- Dispensing fees
- Administrative fees
- Pass-through rebates
- Acquisition pricing
- Duplicate claim payments

## PLAN BENEFIT REVIEW

- Member out-of-pocket
- Member eligibility
- Drug exclusions and prior authorization requirements
- Drug-specific age and gender limitations
- Quantity limitations
- Client custom edits

## CARIBOU EFFICIENTLY DELIVERS COST EFFECTIVE, ACTIONABLE INFORMATION

There are a host of reasons companies audit their prescription drug claims. For many, a key driver is the fiduciary responsibility to manage costs proactively.

In addition, payers who have changed vendors, implemented new benefit designs, or offer a wide range of options to their employees recognize that the resulting complexity can increase the likelihood of payment errors and contract issues.

Caribou's Pharmacy Claims Audit goes beyond just finding errors. By re-adjudicating 100 percent of the claims data, Caribou helps payers manage costs going forward:

- Reports financial results in 50 sub-categories (by drug type, basis of cost, claim channel, and other claim attributes)
- Detailed review identifies financial and utilization trends
- Analytics support decision making during PBM contracting
- Customized audit requirements ensure client needs are addressed
- Detailed claim level reporting clearly communicates issues and results
- Audit follow-up ensures client understanding of findings and focuses on opportunities for improvement



# TECHNOLOGY MAKES THE DIFFERENCE

## CRx

- CRx Gateway accepts and loads data in PBM formats
- Audit Engine examines 100% of the claims provided by the PBM
- Report Writer allows the Audit Analyst to customize output for the client
- Reports can be downloaded to Microsoft® Excel

With Caribou's sophisticated audit system, our auditors have a dependable platform with repeatable, reliable results that allows them to focus on trend analysis.



## AUDIT PROCESS

1

### CONTRACT REVIEW AND BENEFIT DETERMINATION

Caribou auditors dissect PBM contracts and client benefits to determine audit criteria. During this process, our team works closely with both the PBM and the client's benefit group at the directive of client.

2

### CODE BENEFIT AND REPORTING RULES

Once all audit criteria is confirmed, auditors translate and load contract and benefit rules into the CRx system.

3

### EXECUTE AUDIT

The claim file is loaded, and the audit is run.

4

### OUTPUT ANALYSIS

A detailed analysis of outlier claims associated with the benefit review and specialty drug repricing identifies potential errors and processing irregularities. Auditors compare aggregate financial audit system results to PBM self-reported results to identify discrepancies.

5

### PBM RECONCILIATION

Samples of potential errors for benefit and specialty repricing are sent to the PBM for review and research. Reconciliation of financial guarantees is pursued if PBM self-reported results do not align with auditors. Caribou's automated process involves a claim-by-claim comparison between PBM financial guarantee data and original paid claims to diagnose the root cause for the variance. The Reconciliation phase continues until all issues are addressed and there is agreement on the impact of confirmed errors.

6

### FINAL REPORT

The final report contains detailed financial results, customized client utilization reporting and a summary of confirmed errors outlining action items and opportunities for contract improvements.