Sandata

Sandata Fraud, Waste & Abuse Analytics

Business intelligence-powered analytics and dashboards that transform raw data into actionable insights.





Fraud, Waste, and Abuse (FWA) billing practices pose a significant burden on healthcare expenditures, with estimates ranging from \$68 billion to as high as \$230 billion annually. The homecare services sector is particularly susceptible due to its distributed and remote nature. It's crucial for homecare providers to be vigilant, implement robust compliance programs, and collaborate with regulatory bodies to ensure the integrity of homecare services and prevent Fraud, Waste & Abuse (FWA).

Every dollar lost to FWA billing significantly hurts patients, honest providers, payers, and states.

By helping organizations detect and prevent FWA billing practices in greater quantities and before payments are made, it is estimated that up to \$1 trillion in fraudulent, wasteful, and abusive costs can be eliminated from U.S. healthcare by 2030.



Sandata's FWA Dashboards are tailored to State stakeholders working in Fraud, Waste, Abuse prevention & program integrity activities and include:

GPS visit compliance

Provides insights into activity that may seem suspicious as they follow outside parameters that might be considered reasonable.

Provider screening list with sanction details Screens employees against sanction list for compliance. Summary includes matching resultsand sanction details for effective screening.

Client visit conflicts

Track conflicts in client visits across provider agencies. Calendar displays daily conflicts, defined as overlapping services for the same client, aiding in resolving scheduling issues efficiently.

Authorization limit compliance

Highlights providers exceeding authorization limits. Top 25 list displays authorized and exceeded units with blue and red segments respectively, facilitating compliance monitoring and management.

GPS visit in-to-out call compliance

Identifies compliance issues with GPS visit logs. Map displays discrepancies between client and check-in/out locations.

Provider screening list with visit details

Screens visits for caregiver matches against exclusion & sanction lists. Summary includes visit details affected by potential caregiver matches, ensuring compliance and risk mitigation.

Employee visit conflicts

Flags employee conflicts when the same employee is identified on two visits and call times are the same or overlap.

Services authorized & not used

Highlights the count of authorizations that have not been fully utilized.

Introducing FUSE™ Agency Management

Next-level agency management solution that blends best practices learned from supporting 20,000+ agencies with a sleek, reliable, user-friendly interface and intuitive, impactful interactions for an unparalleled agency experience.

- Improve cash flow and reduce friction with a billing module that includes multi-payer claims submissions with a single click
- Leverage AI for shift booking to improve workforce optimization and save valuable time
- Meet care coordination goals with our enhanced clinical platform
- Improve data accuracy, scalability, communication, and compliance with advanced integrations

Ready to get a conversation started? Visit us at www.sandata.com/contactus