

EXPLAIN.
ENLIGHTEN.
ENGAGE.
DRIVE CHANGE.



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Contact Us To Learn More:
(888) 975-1432
or
Sales@Veridikal.com



Data Made Meaningful

What we do: Veridikal Technologies is a company focused on providing business analytic solutions for the Healthcare Industry, including Pharmacy and Hospital Business Sectors. Veridikal offers a range of customizable solution sets designed to meet the unique needs of various Classes of Trade including: Hospitals and Medical Centers, University Health Systems, Long-Term Care Pharmacies, Retail Pharmacies, Specialty Pharmacies, Hospices, and Correctional Facilities, and Employers/Self-Insured Plans.

Our Technology: Veridikal Technologies is an industry leader in the healthcare data solutions and analytics space. For more than a decade, Veridikal has leveraged its industry knowledge, robust analytics platform, and highly experienced team to develop solutions that transform data into actionable insights. Our goal is to help clients make the most of their data by infusing analytics into the daily decision making process. Veridikal utilizes a powerful, scalable analytics engine that is able to continuously evolve and adapt to changing client needs and industry standards.

Our platform allows us to quickly analyze large volumes of live data to provide real-time interventions, while also maintaining large data sets of customer and industry information that are used for the comparative analysis, reporting, and trending of a myriad of metrics and KPIs.

Why Choose Veridikal?: Every organization has a growing volume of "live" data that represents the pulse of their business environment, which can be harnessed to provide valuable insights that help drive more informed decision-making and identify revenue opportunities and threats.

Organizations choose our solution set for its advanced technical capabilities, sophisticated analytics, superior data, and user scalability — all while improving the level and variety of services delivered to clients. We provide integrated reporting, claims analysis, and monitoring while ensuring compliance with patient privacy and data security regulations.

Today, large Drug Wholesalers, PSAO's, GPO's, Industry Advocacy and Regulatory Groups and Large LTC Pharmacy groups, Hospital Organizations, Specialty Pharmacies, and small Independent Pharmacies rely on Veridikal solutions set.

What Sets Veridikal Apart?: The Veridikal approach

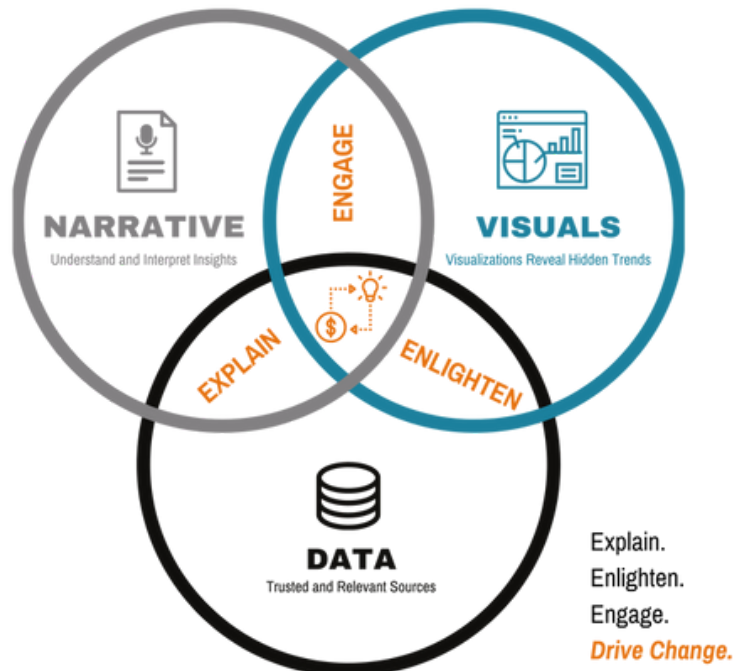
goes beyond providing spreadsheets with action items for client follow-up. We know that every organization's data tells a story, and being skilled at not only analyzing that data, but presenting it in a way that visually conveys context and meaning is what makes us different. We understand the nuances of the pharmacy and related healthcare space and provide our clients with valuable insights into their data that drive measurable organizational improvement.

How we are different than other providers:

Robust and Customizable Editing and Reporting Offerings

Service Category	Veridikal	Pre/Post Edit Providers	Post Edit only Providers
<u>Compliance/Audit Related Pre Edits and Reports</u>	✓	Limited	None
<u>Multiple DAW Pre Edits and Reports</u>	✓	Limited	None
<u>Performance/Operational Pre Edits and Reporting</u>	✓	None	None
<u>PBM & Pharmacy AWP Monitoring</u>	✓	Limited	Limited
<u>Reimbursement Pre Edits and Reporting</u>	✓	Limited	None
<u>Program Overview Support and Reporting</u>	✓	None	None
<u>Visibility Into Audit Risk and Protection</u>	✓	None	None
<u>Custom Edit Builds by Pharmacy or Class of Trade</u>	✓	None	None
<u>Continual Business Analytics</u>	✓	None	Limited
<u>KPI Trending Analysis</u>	✓	None	None
<u>Return on Investment Reporting</u>	✓	None	None

Meaningful Analysis With Actionable Insights Into Your Data

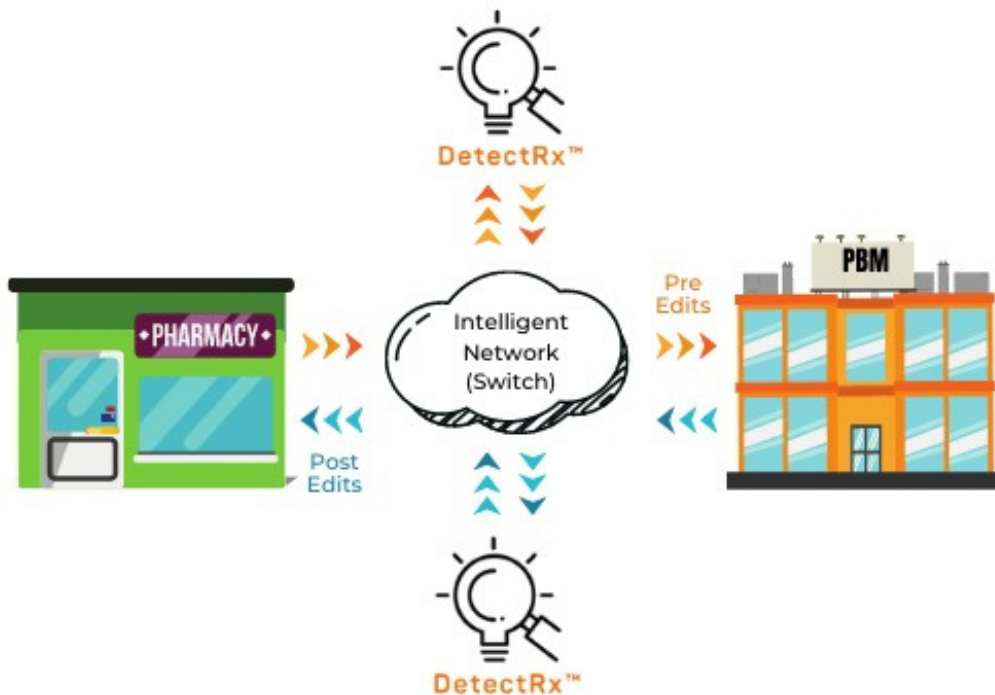


Explore Our Most Popular Solution:



Pharmacy claims adjudication is complex, and reimbursement is constantly changing. Veridikal's pre and post edit (PPE) solution, DetectRx™, is a powerful solution that helps maximize reimbursement, improve productivity, shorten collections windows, reduce resubmissions, increase profits, and provides audit safeguards. Unlike legacy Pre/Post Editing (PPE) systems that have 5-10 basic rules, Veridikal's Next Generation platform has hundreds of advanced business rules and edits that may be tailored to meet the needs of specific pharmacy settings.

Claims Adjudication Process With DetectRx™



Key Features and Benefits of the DetectRx™ program:

- Helps ensure maximum reimbursement is obtained on every claim in real-time
- Protects the pharmacy's revenue up front (Pre) instead of chasing after lost revenue from the payers
- Reduces claim submission errors and resubmissions
- Improves automation, decision-making, and productivity in the pharmacy
- Increases pharmacy's workflow efficiency
- Audit protection program that identifies specific areas of exposure to drive compliance and reduce potential take-back audits
- Next generation reporting with meaningful insights, and clearly defined actionable items
- Comprehensive program staff training that is available as needed and always complimentary
- Free client resource library with access to program tools and industry best practice guides

Core PPE Edits:

Common foundational edits historically offered by legacy PPE solutions

EDIT NAME	DESCRIPTION	EDIT ACTION	IMPACT AREA
DAW APPROPRIATENESS FOR MULTISOURCE BRANDS	Validates the appropriateness of a submitted DAWcode for a multisource brand. If the submitted DAW is NOT equal to 1, 2, or 5, PPE will return a rejected message recommending that pharmacy substitutes a generic or change to the appropriate DAW code.	Reject	Financial
AWP COMPARISON	Compares the submitted ingredient cost (typically AWP) to the most current AWP available. In cases where the submitted ingredient cost (typically AWP) is lower, PPE automatically substitutes the current AWP in the claim so that the new (higher) AWP is submitted to the payer for reimbursement.	Substitution	Financial
QTY, DS MIN/MAX	Compares daily dose using the quantity dispensed and day supply against Maximum Allowable Daily Dose (MADD) to help prevent third-party audits, rejects, or inappropriate payments caused by an atypical dispensed daily dose. Also verifies that a submitted quantity is an appropriate multiple of the package size for a unit-of-use package.	Reject	Financial & Audit
NDC VALIDATION	Identifies when a submitted NDC has been discontinued or obsolete. If the NDC has been replaced, we will provide the New NDC that should be used.	Warn or Reject	Financial
NPI PRESCRIBER ID VALIDATION	Notifies that an invalid, inaccurate, inappropriate, canceled, or facility NPI is used instead of a prescriber's Individual National Provider Identifier (NPI) number (When the prescriber qualifier is equal to 01).	Reject	Audit
DEA VALIDATION	Validates the presence and format of a submitted physician DEA number (when the prescriber qualifier is equal to 12) on claims for controlled substances. Also compares the DEA number against the federal National Technical Information Service (NTIS) file, which is updated daily.	Warn	Audit
CASH PRICING	Supports submission of cash transactions through the RelayHealth Intelligent Network	N/A	Financial
PAID AT U&C CAPTURE REPORT	Identifies if a transaction's submitted U&C is equal to a third party's total reimbursement amount, which typically indicates the cash price is lower than the contracted rate. The edit will also compare the submitted U&C price to the average market U&C based upon the NDC number.	Warn	Financial

Advanced PPE Edits:

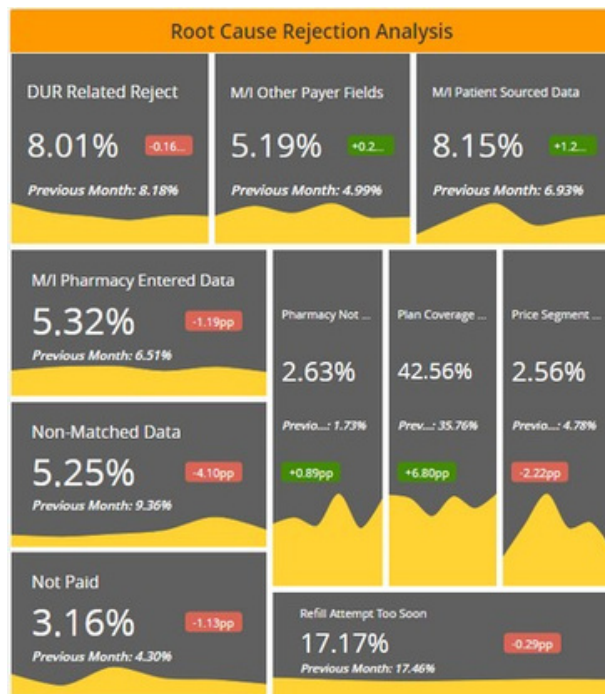
31 additional DetectRx™ edits designed to enhance and refine the core PPE program

EDIT NAME	DESCRIPTION	EDIT ACTION	IMPACT AREA
NCPDP FIELD VALIDATION EDITS	3 edits focused on: <ul style="list-style-type: none"> Pharmacy Service Type DUR Other Coverage Code (OCC) 	Reject	Financial & Audit
DAW VALIDATION EDITS	6 edits focused on specific DAW code usage scenarios to ensure appropriateness. Claim response messages help guide user to most applicable code selection.	Reject	Financial & Audit
NDC VALIDATION EDITS	3 edits focused on: <ul style="list-style-type: none"> FDA Recalls Medicare Non-Covered Glucophage Validation 	Reject	Financial & Audit & Patient Safety
DAYS SUPPLY VALIDATION EDITS	3 edits focused on: <ul style="list-style-type: none"> Days Supply > 100 Insulin Dosing Validation Morphine Milligram Equivalent (MME) Validation 	Reject	Audit & Patient Safety
DATE WRITTEN VALIDATION EDITS	4 edits focused on: <ul style="list-style-type: none"> Controlled Substance C(II) and C(III-V) Date Written Legend Drug Date Written Validation 90 Day Reversal Validation 	Reject	Financial & Audit
PRESCRIBER VALIDATION EDITS	4 edits focused on: <ul style="list-style-type: none"> Primary Care Provider ID Validation Prescribed Quantity Validation for C(II) medications OIG Sanctioned Prescriber Original Prescribed Amount Validation 	Reject	Workflow & Audit
PRICING VALIDATION EDITS	2 edits focused on: <ul style="list-style-type: none"> Submitted Gross Amount Due (GAD) > \$25K Validation Submitted Pricing Validation (ING, GAD, or U&C is zero) 	Reject	Financial & Audit
DIAGNOSIS CODE VALIDATION EDITS	2 edits focused on: <ul style="list-style-type: none"> Diagnosis Code Validation for Med B Plans Diagnosis Code Qualifier Field Validation 	Reject	Audit
COVID VACCINE VALIDATION EDITS	3 edits focused on: <ul style="list-style-type: none"> Covid SCC Code Appropriate Use Validation Covid Age Validation For Vaccine Appropriateness 	Reject	Audit & Patient Safety
COMPOUND CLAIM VALIDATION	Edit checks to ensure the compound claim segment fields are all populated appropriately	Reject	Financial

Next Generation Reporting:



Program Performance KPI Reporting



Denial Management Reporting

Illustrative Performance Value Report

	Total	Direct Savings		Audit Risk Management		
		Exceptions	Actual	Add'l Opp.	Protection	Risk
Accepted Claims	6,821					
Direct Savings:						
Actual	\$2,133	27	\$1,545	\$310		
Additional Identified Opportunities	459	94	368			
Total Savings	\$2,592	17	117			
Direct Invoice Cost	512	16	77		\$78	\$1,319
Return on Investment	5.1x	143	14			
Audit Risk Management:		127	13			
Protection	\$166	33		80		
Risk	2,026	10		68		
		1		2		
		2				440
		1			87	
		7				266
Total		478	\$2,133	\$459	\$166	\$2,026

ROI Reporting

DetectRx™ offers more than just standard spreadsheets.

Our reporting is easy to understand with actionable data and meaningful insights, all delivered conveniently to your inbox.

Did you know Veridikal now offers several Added Value Solutions as part of your Pre/Post Edit service?

eVoucher has quickly become a very popular solution, and now we are pleased to offer Denial Conversion as a companion solution as well.

eVoucher™

Key Features of the eVoucher program:

- No pharmacy cost or set-up required, easy implementation
- Works in real-time at the point of dispensing
- Automatically applies electronic coupon savings to co-pay of eligible claims for select brand name drugs
- Designed for commercial insurance plans, government sponsored claims are excluded

Benefits of the eVoucher program:

- Makes it easier for patients to receive the co-pay savings
- Increases pharmacist efficiency by reducing workflow interruptions
- Boosts number of prescriptions filled due to affordability
- Reduces prescription abandonment
- Increases patient compliance with therapy
- Enhances patient satisfaction
- Pharmacy earns a bona fide service fee on eligible transactions

Denial Conversion™

Denial Conversion increases patient adherence for pharmaceutical brands with co-pay savings on claims that are not covered by a plan's formulary. If an eligible claim is rejected as nonreimbursable, the Denial Conversion solution converts the rejected claim to a paid response and returns a specified patient co-pay and patient savings notification. The prescription drug is then dispensed as prescribed, aiding in patient medication adherence. As a result, patients are more likely to leave the pharmacy with their prescribed therapies in-hand thus helping to increase brand market share and positively contribute to their overall wellbeing.

Benefits of the Denial Conversion Solution

- Keeps patients on brand and reduces abandonment
- Improves patient medication accessibility
- Supports efficient pharmacy workflow and operations
- Increases patient satisfaction, acquisition, and retention
- Gives physicians the freedom to prescribe medication that best fits a patient's needs

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Did you know Veridikal now offers several Added Value Solutions as part of your Pre/Post Edit service?

PriorAuthplus™

Key Benefits of the PriorAuthplus program:

- Helps ensure patients receive the medication preferred by their doctor
- Reduces prescription abandonment
- Builds relationships and improves PA response via collaboration with other healthcare professionals
- Improves pharmacy and prescriber productivity via a streamlined PA process
- Reduces follow up calls to the prescriber

What is PriorAuthplus?

PriorAuthPlus helps pharmacies initiate medication and plan specific Prior Authorization (PA) forms via a resubmitted claim. This free service works for most commercial and government (i.e. Medicare & Medicaid) prescription benefit plans.

Upon receipt of a Prior Authorization related rejection (“70”-NDC Not Covered, “75”-Prior Authorization Required and “76”-Plan Limitations Exceeded), resubmit the claim to the PriorAuthPlus BIN (BIN #015079). RelayHealth uses the claim and rejection data from the original claim to create a PA form in CoverMyMeds. A rejected response is delivered in response with instructions on how to access the PA form in CoverMyMeds. Confirming the PA form autofills patient, medication and prescriber information from the original claim. The prescriber’s office adds clinical information, digitally signs the form, and faxes the form to the health plan via CoverMyMeds.

What kind of messages can I expect to see?

PriorAuthPlus claim resubmission process works for any medication. However from time to time, appropriate rejection codes are augmented to remind the Pharmacy to use this BIN for certain medications.

The message looks as follows: *Initiate Prior Authorization by submitting this claim to BIN 015079 (PriorAuthPlus Assistance)*

An augmented rejection message is always delivered each time a claim is resubmitted to the PriorAuthPlus BIN. The message confirms your PA request and provides instructions to access the form via CoverMyMeds. It looks as follows: *Prior Authorization (PA) initiated. Login to CoverMyMeds.com to send this PA to the prescriber for submission to the plan.*

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Premium Solutions

RxSafety Advisor™

RxSafety Advisor is the optimal solution to help enhance your pharmacy's safety and compliance program, providing a last line of defense to protect your pharmacy, pharmacists and patients from the detrimental effects of medication dispensing errors.

RxSafety Advisor helps improve patient safety by checking for drug dosing and dispensing errors. Our proven technology reinforces your pharmacists' clinical expertise and gives patients full confidence in the prescription dispensing process.

[How RxSafety Advisor Works:](#)

When combined with the pharmacist's knowledge, RxSafety Advisor helps to minimize the risk of prescription drug dosing and dispensing errors by notifying the pharmacist of any issues prior to filling a prescription.

RxSafety Advisor first examines National Drug Code (NDC) numbers, drug dispensing

quantities,

and days' supplies. It cross-references this data against absolute minimum and maximum safe prescription dosing, clinical significance scoring and likelihood scoring. It then indicates any potential look-alike/sound-alike (LASA) medication errors.

Advanced medication screening services deliver even greater screening benefits, including medication dose screening for pediatric patients (ages 12 and under) and geriatric patients (ages 65 and older).

[Key Features of the RxSafety Advisor program:](#)

- Integrates with existing pharmacy management systems
- Supports state quality assurance programs
- Screens for lookalike/soundalike (LASA) drug pairs

[Benefits of the RxSafety Advisor program:](#)

- Reduces risk of drug dosing and dispensing errors
- Improves patient confidence and safety
- Enhances pharmacy staff productivity
- Increases regulatory compliance

This premium solution requires a monthly subscription. Veridikal is currently offering it at the low price of \$20/month, which makes it an excellent value!