# Design patterns in insurance cost prediction

Using Python, Django and React

Christopher Mason



#### Outline

- About Counsyl
- How/why estimate insurance cost?
- Key Challenges
- Estimate Process and Models
- Key Patterns and anti-Patterns
- Lessons learned

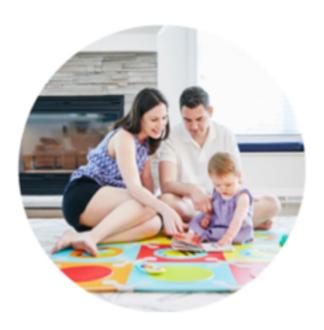
## About Counsyl

- We offer DNA screening for men, women, and their children.
- Our focus is on diseases where advanced knowledge makes a difference in health outcomes.
- We strive to make genetics routine in clinical practice.

## Counsyl Products

#### Foresight™ Carrier Screen

Learn about over 175 inherited diseases you and your partner might carry that could affect your future family.



#### Prelude™ Prenatal Screen

Non-invasively test for chromosomal conditions early in your baby's development.



#### Reliant™ Cancer Screen

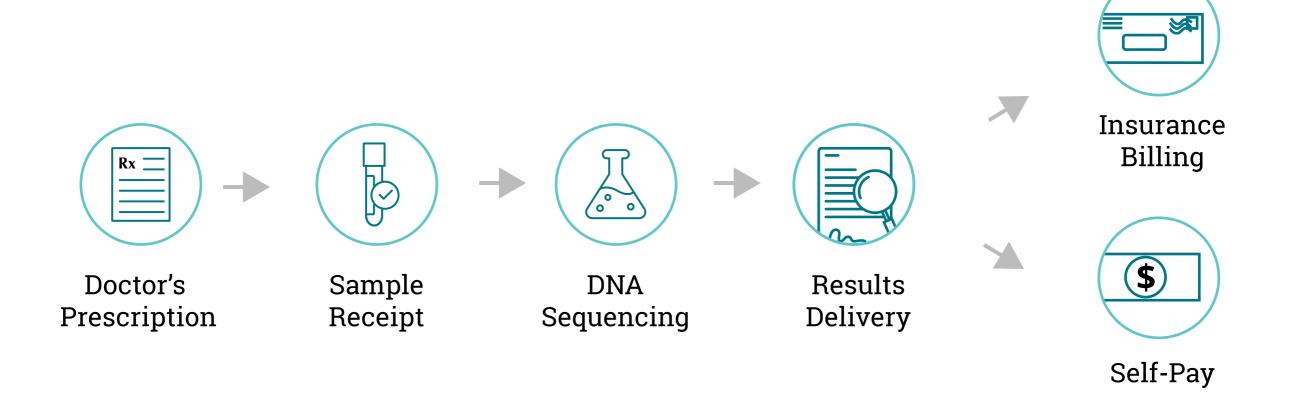
Learn about your risk of developing certain preventable cancers before they happen so you can be prepared.



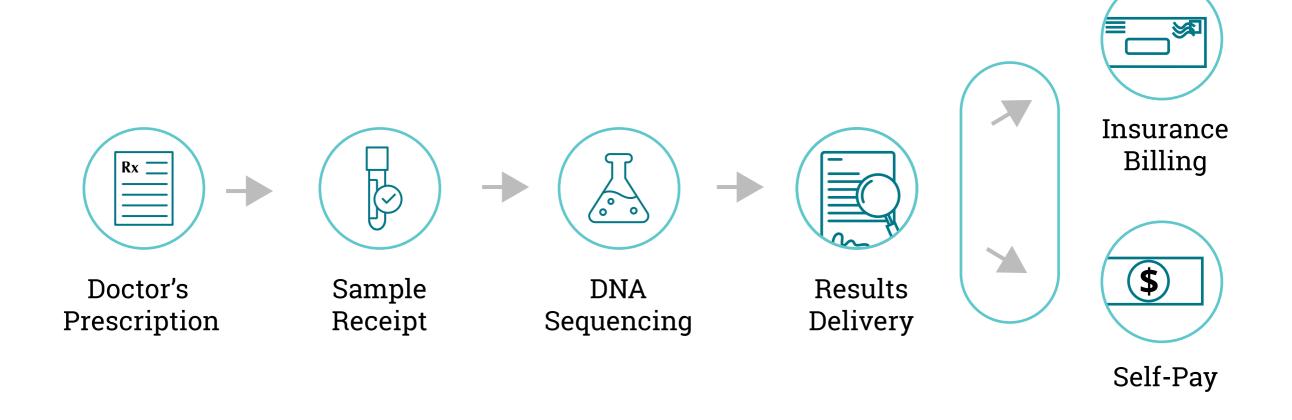
#### Our tech stack



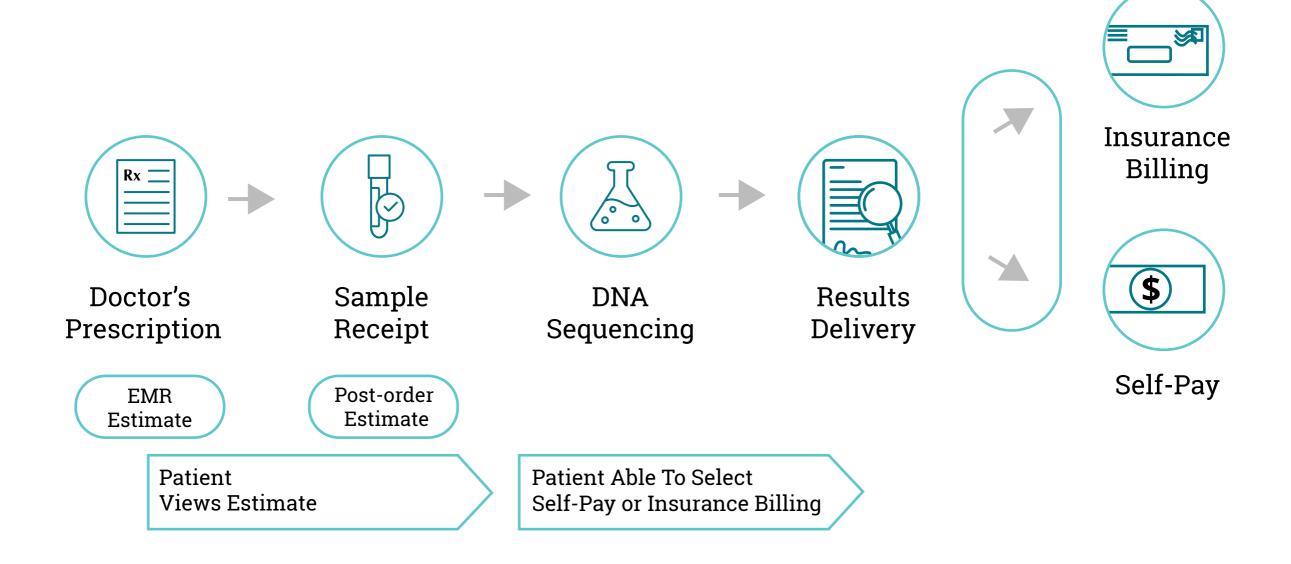
## How Counsyl works



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## How Counsyl works



Test: Gene Panel: 175+ Diseases

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☐ Claim: Counsyl → Insurance Company

<u>Disease</u>	<u>CPT Code</u>	<u>Charged</u>
Cystic Fibrosis	81220	\$299.00
Gaucher disease	81251	\$ 47.25
•••	•••	

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Insurance Benefits:

@ Insurance Company

Deductible \$100.00 Co insurance 10%

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(🗸) Insurance Benefits:

@ Insurance Company

Deductible \$100.00 Co insurance 10%

Explanation of Benefits (EOB): Counsyl — Insurance Company

<u>CPT Code</u>	<u>Charged</u>	<u>Allowed</u>	<u>Paid</u>	<u>Deductible</u>	<u>Coinsurance</u>
81220	\$299	\$254	\$138	\$100	\$15
81251	\$ 47	\$ 0			
•••	•••	•••	•••		

Test: Gene Panel: 175+ Diseases

Claim: Counsyl → Insurance Company

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•••					

Appeals / Followup Counsyl → Insurance Company



## What are we estimating?

## Patient Responsibility What patient owes

#### Patient = Deductible

Fixed amount patient owes out-of-pocket each year before insurer will pay for any health expenses

#### + Coinsurance

After deductible is met, patient owes a certain percentage of all medical charges

#### + Copay

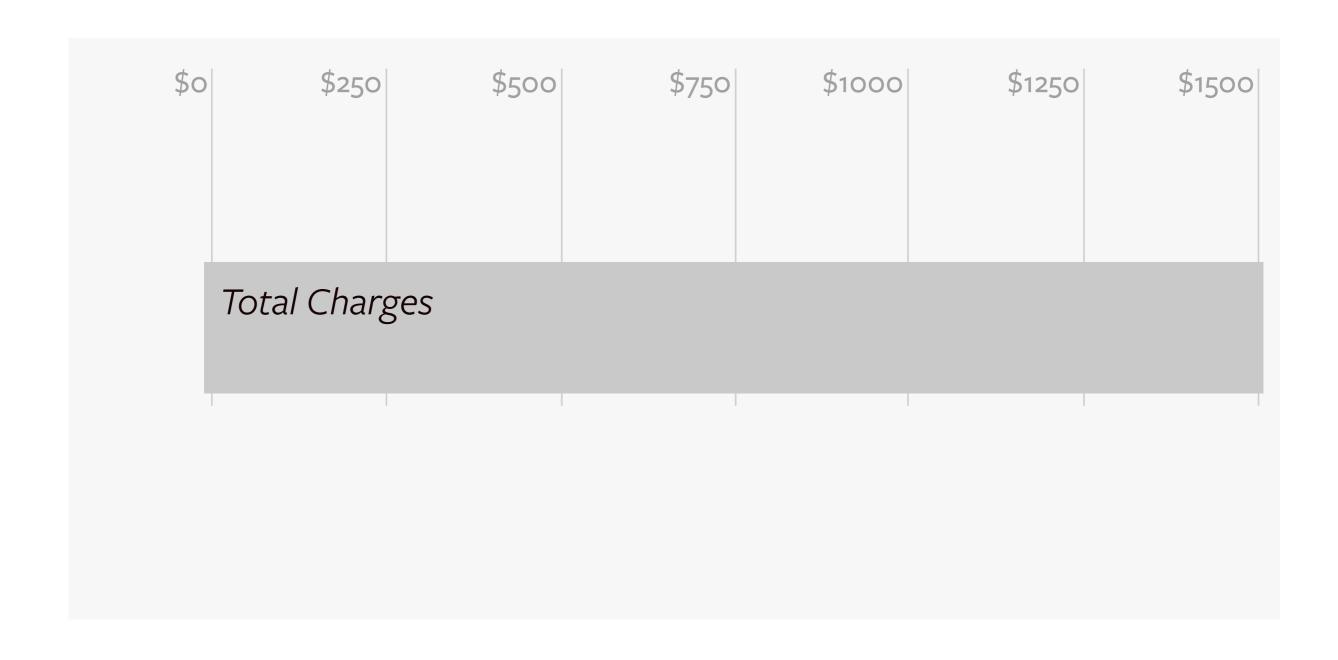
For every medical service rendered, patient owes a fixed, usually small, dollar amount

Allowed = Amount insurance thinks our test is worth

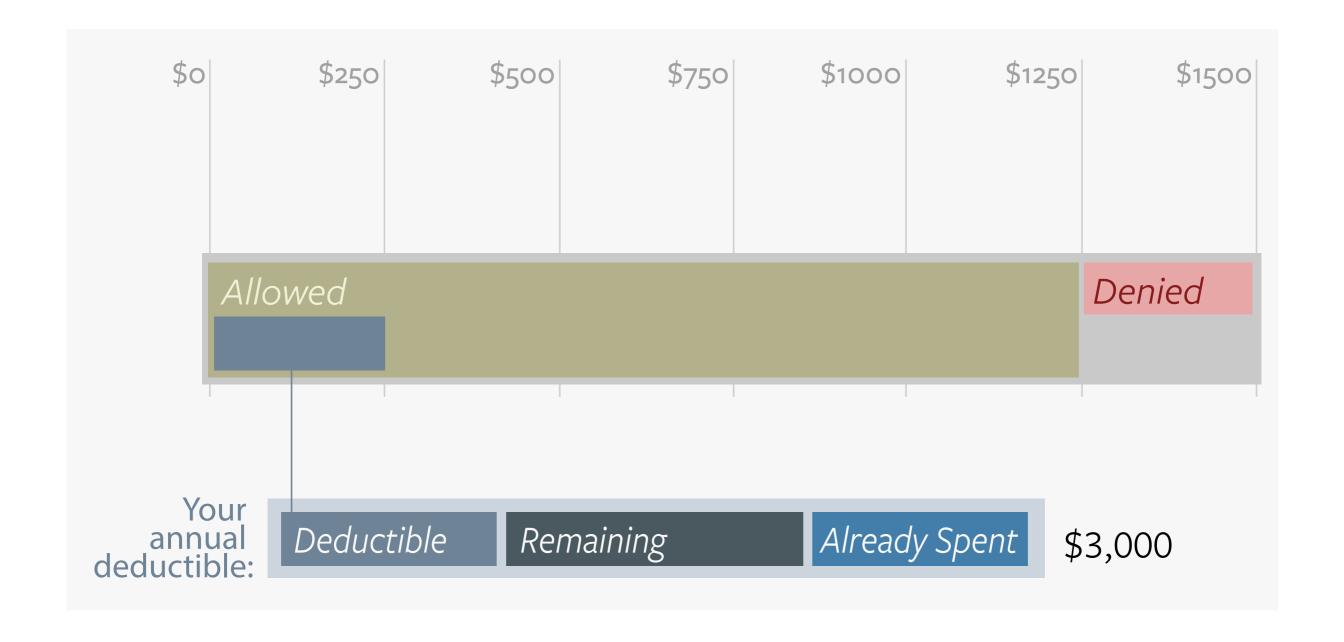
Total Charges = Allowed (PR+Paid)

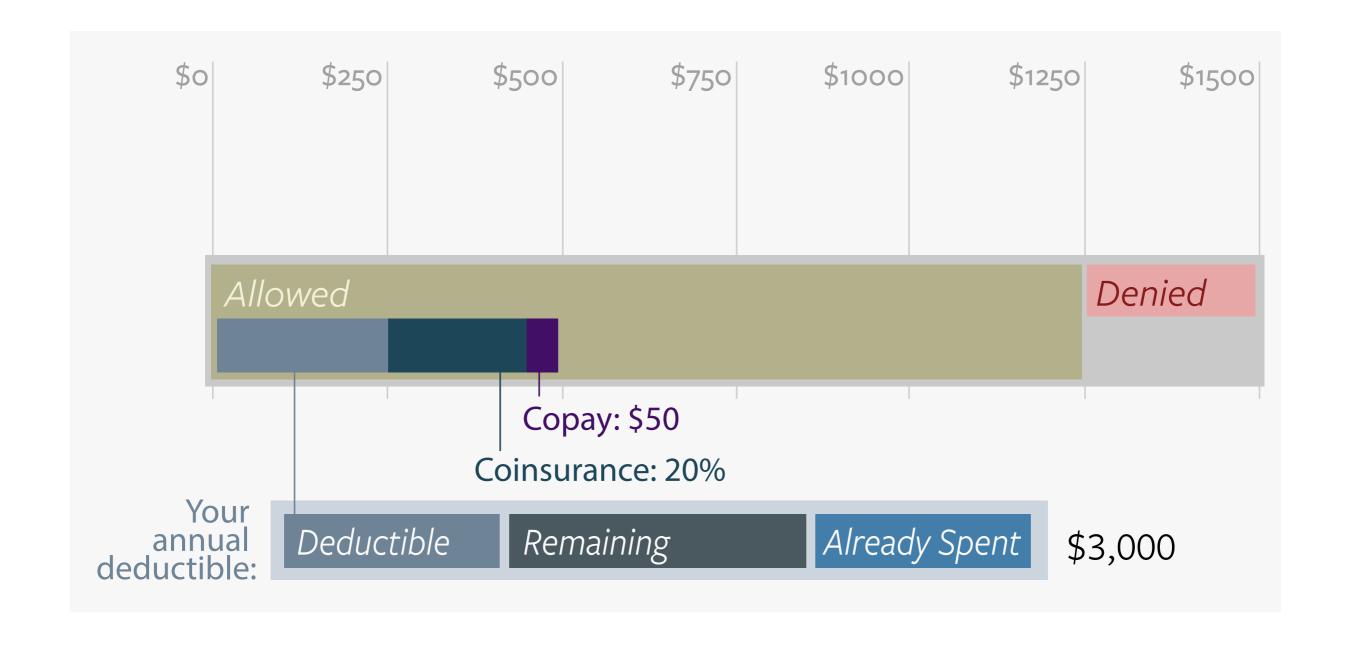
+ Denied

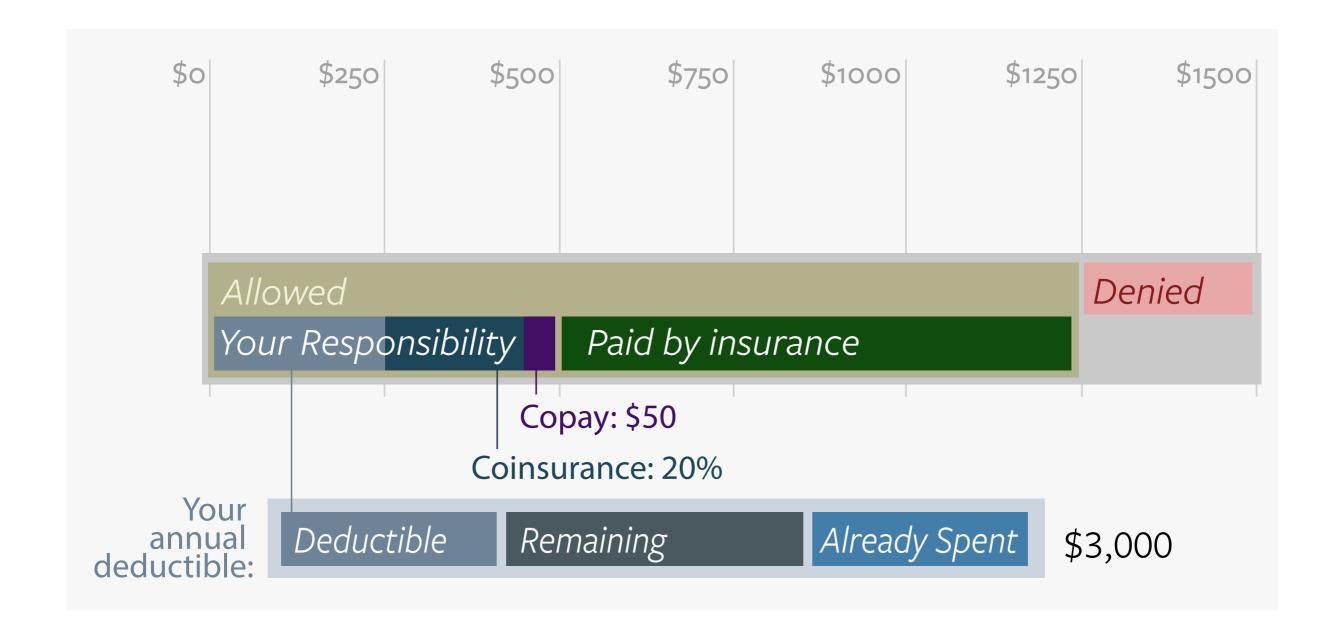
## How do insurers compute patient responsibility?

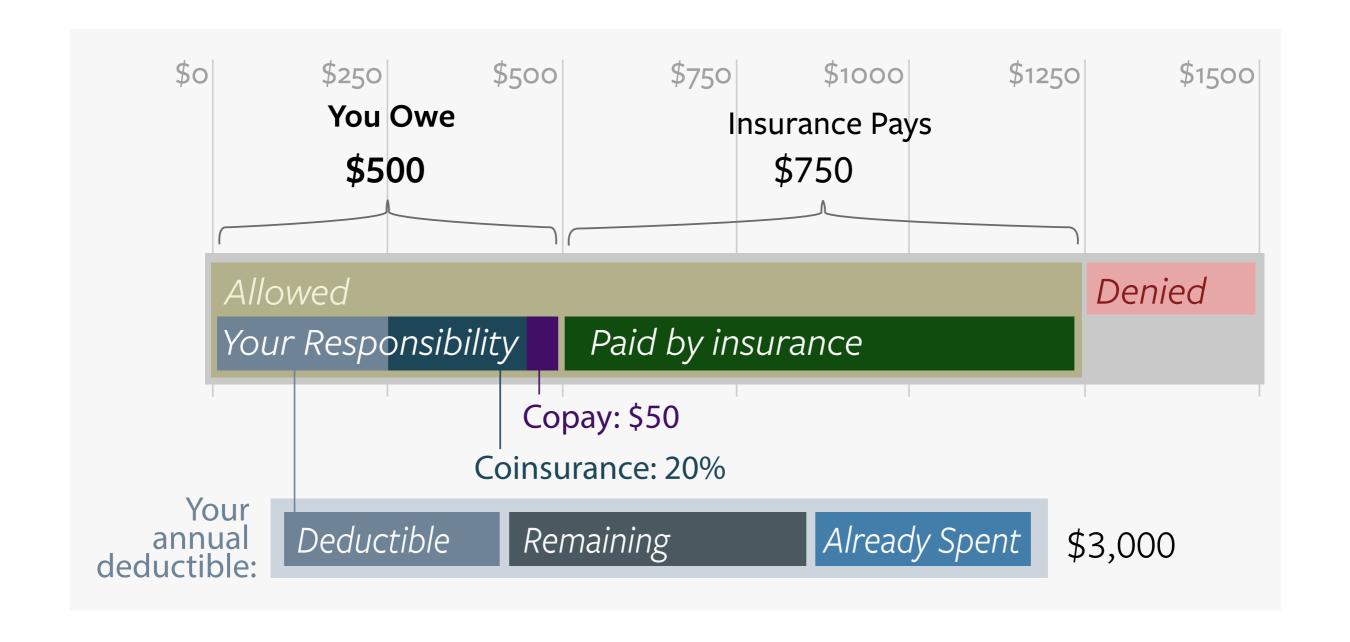












## Why Estimate?

- Answer "What does it cost?"
- Provide transparency into billing
- Allow patients to decide whether to use their insurance benefits

### Demo

#### How Estimate?

Step: Benefits Research Prediction Estimate Display

- Retrieve Deductible, Coinsurance from Insurer
- Filter benefits for relevance
- Predict expected reimbursment using historical claims
- Evaluate patient's family history against insurer medical policy

- Apply billing rules and policy
- Determine alerts based on current state
- Allow choice of bill type

#### Estimation Process

Step:	Estimation Overall	Benefits Research	Allowed Prediction		Estimate Display
Key Classes:	PriceCalculator Request (M)	Eligibility Inquiry (M)	CPTPricing Estimate (M)	Pricing Estimate (M)	Patient Pricing Estimate (C)
Key Patterns and anti-Patterns:	Request/ Response Models	Mutability Mutable-until	Sub-App/Service	Rules Engine	Facade Logical Templates Rules Engine
Key APIs and interactions:	Billing engine Ordering API	Eligible API	Prediction App	Billing rules and policies	Estimate JSON JS Client PEView

## Key Design Constraints

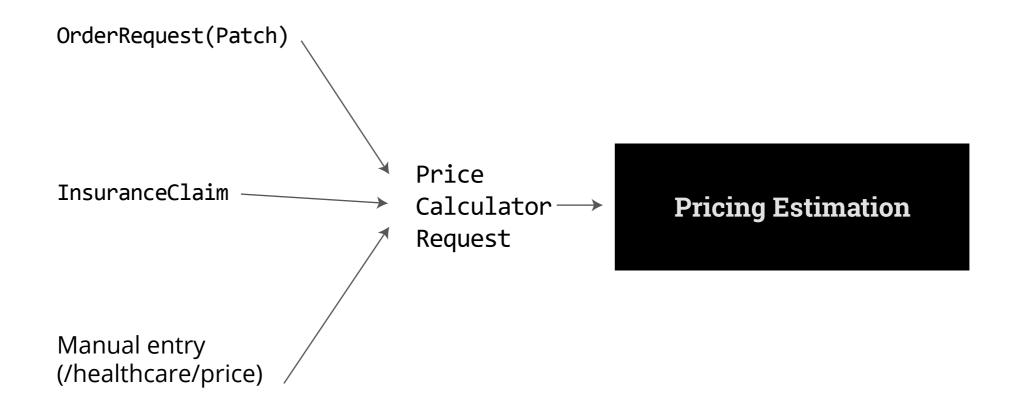
- Edge cases dominate:
  - Significant percentage of patients don't see a numeric estimate
- Recapitulates essentially all of billing
- Save everything patient sees
- Estimates change over time
- Desire for isolation (aspirational)

## Estimation Process and Models

### Request/Response

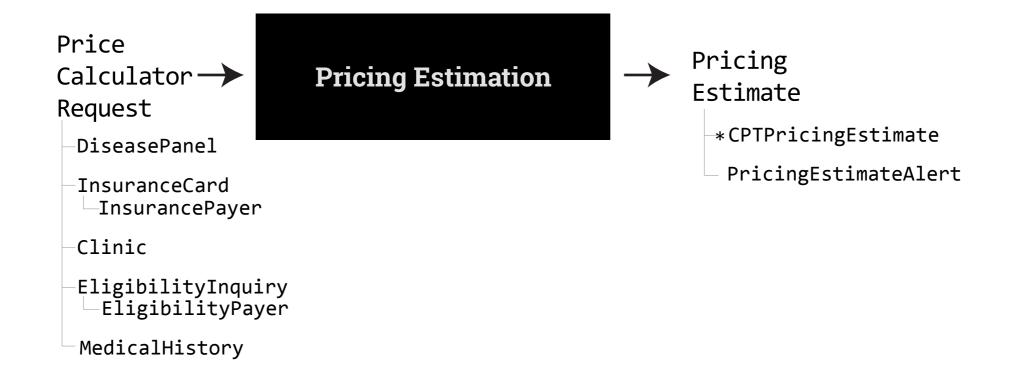


## Estimates Input



```
class PriceCalculatorRequest(models.Model):
    first_name = HIPAAIdentifierCharField(max_length=100)
    last name = HIPAAIdentifierCharField(max length=100)
    gender = models.CharField(max_length=10, choices=G.GENDER_CHOICES)
    dob = HIPAAIdentifierDateField()
    state = models.CharField(choices=G.STATE CHOICES)
    product = models.ForeignKey(Product, blank=True, null=True)
    disease panel = models.ForeignKey(DiseasePanel, blank=True, null=True)
    payer = models.ForeignKey(InsurancePayer)
    in network = models.NullBooleanField()
    member id = HIPAAIdentifierCharField(max length=100)
    group_number = models.CharField(max_length=100, blank=True)
    relationship_to_insured = models.CharField(
        choices=((G.RELATIONSHIP_SELF, 'My own plan'),
                 (G.RELATIONSHIP_DEPENDENT, 'Someone else\'s plan')))
    physician = models.CharField(max_length=100, blank=True, default='')
    physician state = models.CharField(choices=G.STATE CHOICES)
    clinic = models.ForeignKey(Clinic, blank=True, null=True)
    timestamp = models.DateTimeField(auto_now_add=True)
    eligibility_inquiries = models.ManyToManyField(EligibilityInquiry)
    pricing_estimate = models.ForeignKey(
        PricingEstimate,
        blank=True,
        null=True)
    completed on = models.DateTimeField(null=True)
```

### Request/Response



#### Benefits Research

Contact Insurer via Clearinghouse

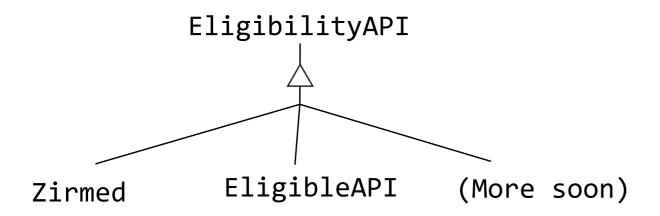
Electronic Data Interchange (EDI) standard to request benefits data. Clearinghouse reformats as JSON.

Apply Coverage Filters

Exclude non-pertinent benefits amounts.

Apply Coverage Amount Rules

Replace known-bad data with fixed values.



#### EligibilityInquiry

request:JSONField
raw\_response:(JSON)
timestamp\_submitted
timestamp\_responded
eligibility\_payer
has\_error

. . .

#### Example Inquiry Response

```
"created_at": "2017-03-10T18:30:59-05:00",
"demographics": {
    "dependent": {},
    "subscriber": {
        "address": {
            "city": "Lucedale",
            "state": "MS",
            "street_line_1": "9405 Deer Way",
            "street_line_2": null,
            "zip": "39452"
        "dob": "1987-12-02",
        "first_name": "Eugenia",
        "gender": "F",
        "group_id": "00605103",
        "group name": "BayCare Health System, Inc.",
        "last_name": "Clemmons",
        "member_id": "4035592912006100",
        "middle name": "M"
"eligible_id": "VFEYS4WOKSRPT",
"insurance": {
    "contacts": [ cm ],
    "id": "00001",
    "name": "Cigna HealthCare",
    "payer_type": "PR",
    "payer_type_label": "Payer",
    "service providers": {
        "physicians": []
},
```

#### **EligibleAPI**

```
"plan": {
               "group_name": "BayCare Health System, Inc.",
               "plan name": "PPO",
               "plan number": null,
              "plan_type": "PR",
              "plan_type_label": "Preferred Provider Organization (PPO)",
               "dates": [ 🚥 ],
              "exclusions": { cm },
              "financials": {
                              "coinsurance": { con },
                              "copayment": { copayment": { copayment"
                              "cost_containment": { cm },
                              "deductible": {
                                              "remainings": {
                                                             "in_network": [
                                                                                             "amount": "500.00",
                                                                                            "authorization_required": null,
                                                                                            "comments": [
                                                                                                           "Includes services provided by Client Specific
                                                                                                            "For primary customers covered under single co
                                                                                                           "For primary customers covered under family co
                                                                                                            "Accumulators are shared between Medical AND \
                                                                                             "contact_details": [],
                                                                                            "dates": [],
                                                                                            "description": null,
                                                                                             "insurance_type": null,
                                                                                            "insurance_type_label": null,
                                                                                             "level": "FAMILY",
```

#### Example Inquiry Response

#### Coinsurance

**10%** type: Diagnostic Lab (5)

level: INDIVIDUAL

pos: (none)

type: Diagnostic Lab (5)

comments: EPO NETWORK

level: INDIVIDUAL

pos: (none)

comments: PAR NETWORK

filtered: (not filtered)

comments: EPO NETWORK

10% type: Diagnostic Lab (5)

level: INDIVIDUAL

pos: Office (11)

20%

20%

type: Diagnostic Lab (5)

level: INDIVIDUAL

pos: Office (11)

comments: PAR NETWORK

#### Filtered Inquiry Response

#### Coinsurance

20%

10% type: Diagnostic Lab (5) level: INDIVIDUAL pos: (none)

comments: EPO NETWORK

filtered: Out By: Ignore EPO NETWORK

20% type: Diagnostic Lab (5) level: INDIVIDUAL pos: (none)

comments: PAR NETWORK

filtered: (not filtered)

**10%** type: Diagnostic Lab (5) level: INDIVIDUAL pos: Office (11)

comments: EPO NETWORK

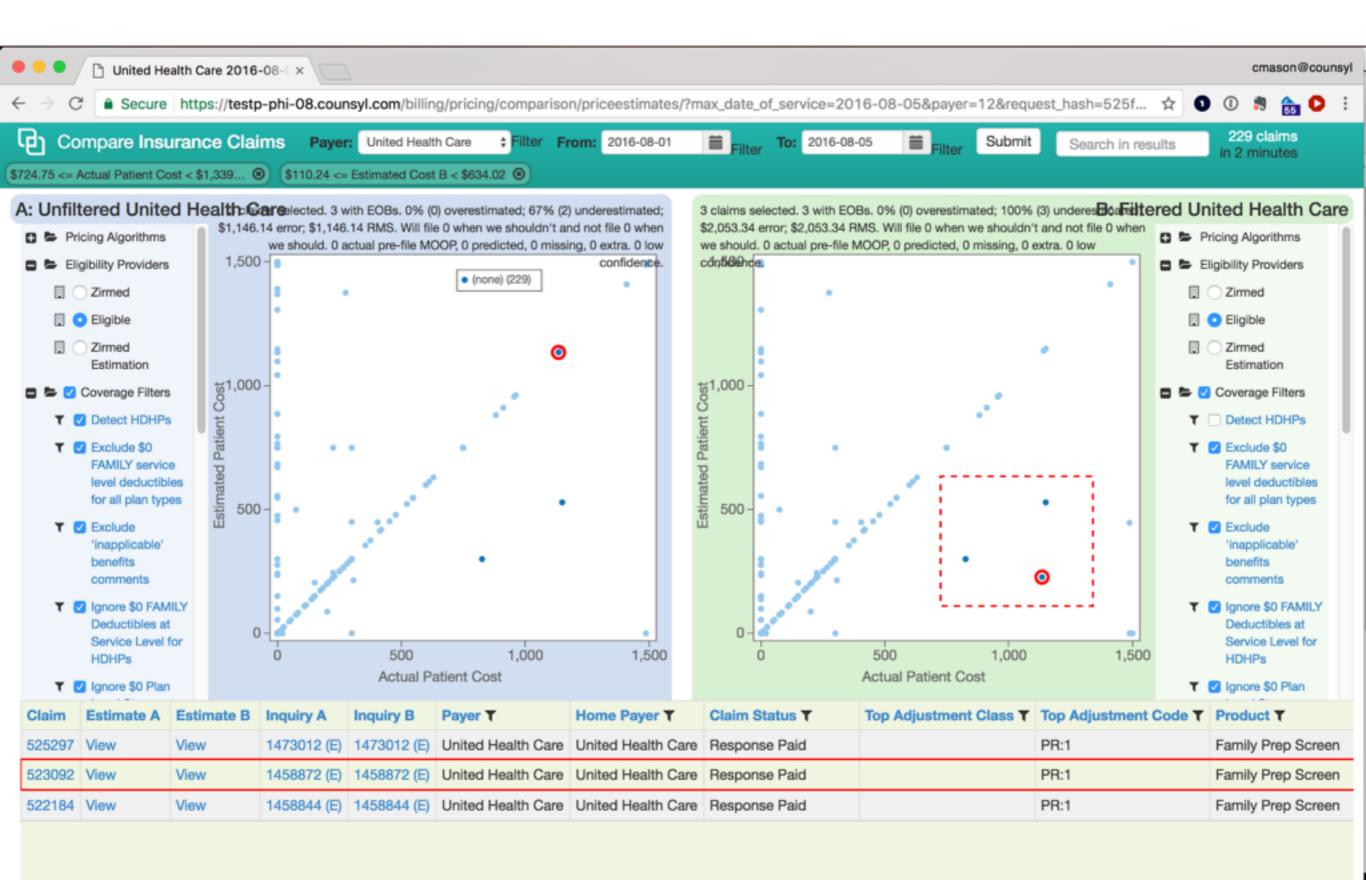
filtered: Out By: Ignore EPO NETWORK

20% type: Diagnostic Lab (5) level: INDIVIDUAL pos: Office (11)

comments: PAR NETWORK

filtered: Out By: Ignore POS:Office

#### Manual Creation of Filters



#### Anti-Pattern: Masochistic Mutability

*Goal:* If at all possible, make it immutable.

Alternatives: "Mutable-until". Change Log. Patches.

Example:

#### InsuranceClaim

raw\_deductible:Decimal

remaining\_deductible:Decimal

co\_insurance:Decimal

• • •

## Pattern: Mutable-until (aka Immutable-after)

*Goal:* Model is mutable while being processed, but

a final event marks it as immutable.

Alternatives: Changelog, Patches

Example:

### EligibilityInquiry

raw\_response
timestamp\_responded

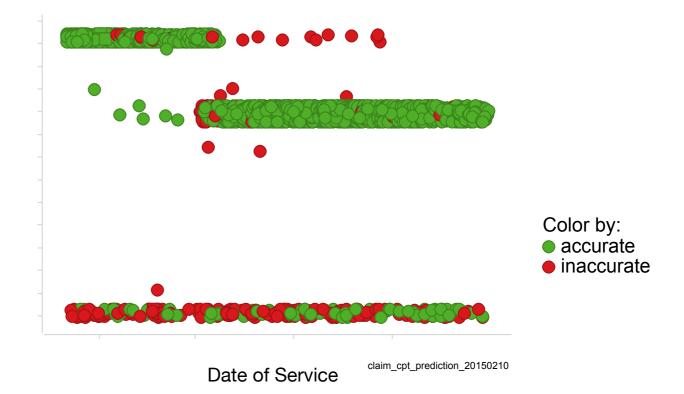
. . .

## Allowed Prediction

## Recall:

Allowed = Amount insurance thinks our test is worth

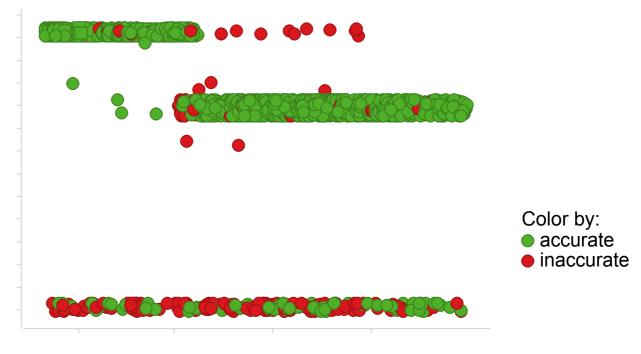
- Find similar historical claims
- Take most common allowed \$



### For Each CPT:

- Find similar historical claims
- Take most common allowed \$

Sum allowed values across CPTs



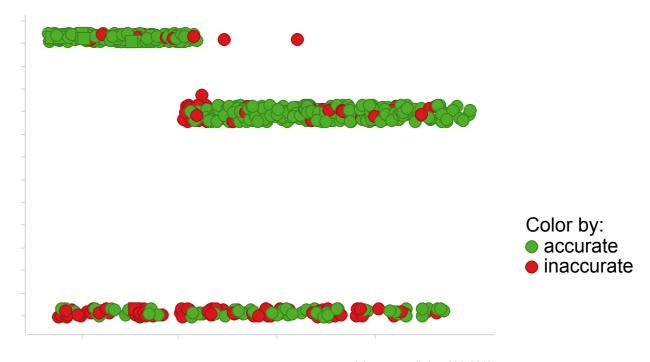
Date of Service

claim\_cpt\_prediction\_20150210

#### For Each CPT:

- Find similar historical claims
- Take most common allowed \$

Sum allowed values across CPTs



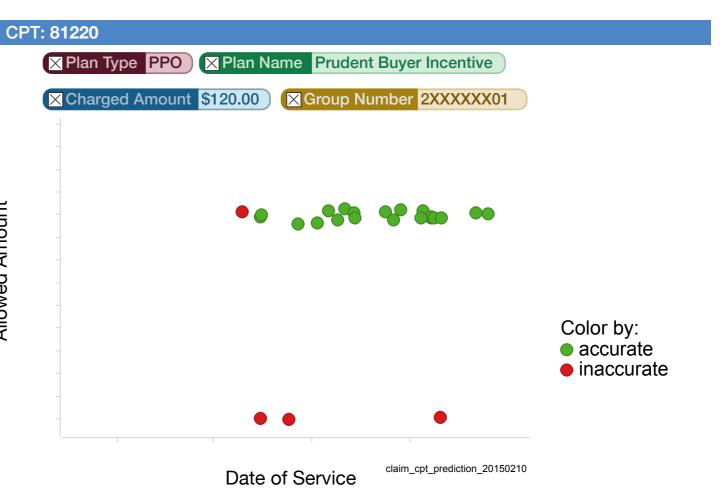
Date of Service

claim\_cpt\_prediction\_20150210

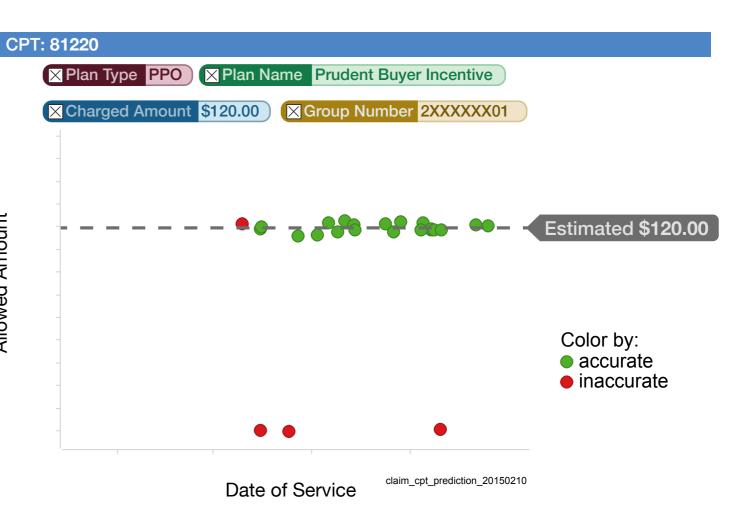
- Find similar historical claims
- Take most common allowed \$



- Find similar historical claims
- Take most common allowed \$



- Find similar historical claims
- Take most common allowed \$



# Pluggable Algorithms

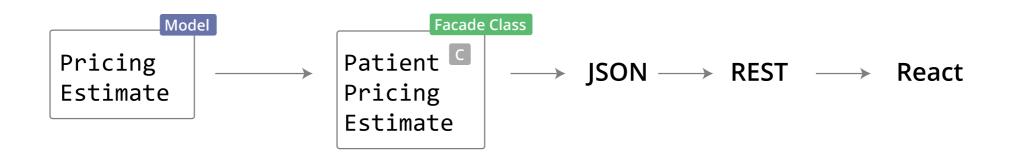
```
class PriceEstimator(object):
  Interface for predicting PricingEstimates.
  def get_algorithm_constant(self): # pragma: no cover
    Return PRICING_ALGORITHM constant for this algorithm.
    raise NotImplementedError()
  def get_pricing_estimate(self,
                 price_calculator_request,
                 coverage_details, in_network,
                 requested_by, code_set=None,
                 disable_moop=False,
                 use_coverage_amounts_rules=True,
    return PricingEstimate(...)
```

# Estimate Prep

- Sum up per-CPT estimates
- Apply patient's benefits
- Apply billing rules / policies
- Save PricingEstimate

```
class PricingEstimate(TaggableMixin, models.Model):
  eligibility_inquiry = models.ForeignKey(EligibilityInquiry)
  disease_panel = models.ForeignKey(DiseasePanel)
  code_set = models.ForeignKey('coding.CodeSet')
  algorithm = EnumField(EC.PRICING_ALGORITHM)
  git_hash = models.CharField() # Git hash of code that generated estimate.
  timestamp = models.DateTimeField(auto_now_add=True)
  estimated_copayment = models.DecimalField(decimal_places=2, max_digits=20)
  estimated_deductible = models.DecimalField(decimal_places=2, max_digits=20)
  estimated_coinsurance = models.DecimalField(decimal_places=2, max_digits=20)
  estimated_coinsurance_percent = models.DecimalField(decimal_places=2, max_digits=20)
  estimated_other_patient_responsibility = models.DecimalField(decimal_places=2, max_digits=20)
  estimated_total_before_comp = models.DecimalField(decimal_places=2, max_digits=20)
  estimated_total_before_comp_lower_bound = models.DecimalField(decimal_places=2, max_digits=20)
  coverage_filters_set = models.ForeignKey(HistoricalCoverageAmountFilterSet,null=True)
  billing_policy = models.ForeignKey(BillingPolicy, null=True)
  confident_in_benefit_amounts = models.NullBooleanField(
    "Confident in benefit amounts",
    help_text=('Are we relatively confident in the coverage amounts '
           'used to generate this estimate?'),
    default=None)
  confident_in_allowed_amounts = models.NullBooleanField(
    "Confident in allowed amounts",
    help_text=('Are we relatively confident in the estimated allowed '
           'amount?').
    default=None)
```

# Estimate Display



# "Edge" Cases

- Bad patient info: not able to id patient
- Prior auth, Pre-test counseling: insurance requirements to reduce demand
- No benefits info: able to find patient but no benefits returned.

• ...

### Anti-Pattern: Logical Templates

Problem: Embedding display logic and variable content in HTML templates.

Alternatives: Content Management System, Rules Engines

```
Example:
```

```
{% if patient_estimate.show_prior_auth_in_description %}
   {% include "my/pricing_estimate/_needs_prior_auth_description.html" %}
   {% endif %}
   <div class="nav-links">
   {% if patient_estimate.should_show_breakdown_section %}
   <a href="#estimate-breakdown">See full breakdown &raquo;</a>
...

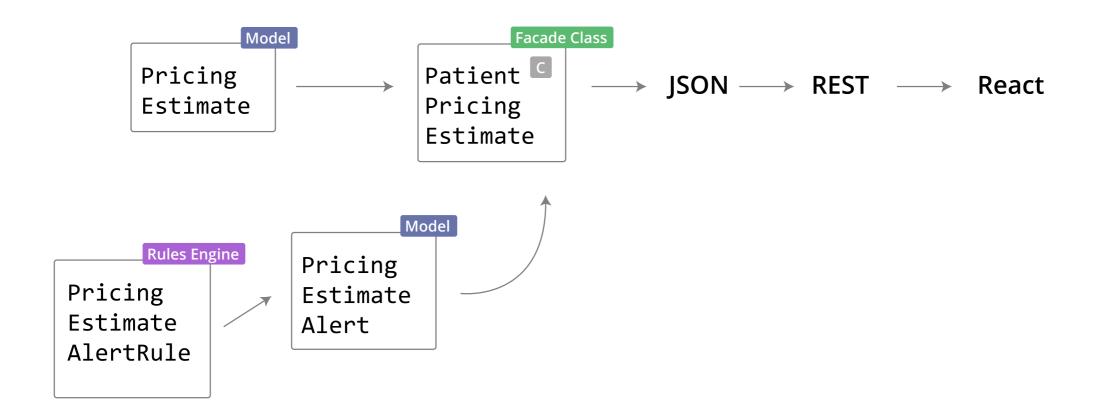
   {% if patient_estimate.should_show_order_now_and_edit_buttons %}
        <a class="btn btn btn--default price-calculator-start-over" href="#">Edit my information</a>
        <a class="btn btn btn--primary" href="{{ product_order_url }}">Order now</a>
        {% endif %}
        </div>
        </div>
        </div>
        </div>
        </div|
        </td>

        % endif %}
```

## Alerts

- "Mini-CMS" for "Unhappy Cases"
- Let's business/insurance/UX experts change how we present non-numeric estimates.
- Markdown + Rules Engine

# Estimate Display



## Demo

### Pattern: Rules Engine

Goal: Policy as data

Alternatives: Hard coded logic, BRMS, Expression Language

Example:

```
class PricingEstimateAlertRule(gradgrind.NoConflictCheckingRulesEngine):
    atom model = 'brochure.PriceCalculatorRequest'
                                                                         predicates = Predicates(
    uuid = models.UUIDField()
                                                                             IntersectionPredicate('product', 'products'),
    description = models.CharField()
                                                                             IntersectionPredicate('payer', 'payers'),
    priority = models.IntegerField()
                                                                             IntersectionPredicate(
                                                                                 'insurance_claim__code_set__service_lines_
    # Value Fields:
                                                                                 'cpt_codes'),
    add_alerts = models.ManyToManyField(PricingEstimateAlert)
                                                                             FieldPredicate('in_network'),
    remove_alerts = models.ManyToManyField(PricingEstimateAlert)
                                                                             FieldPredicate(
                                                                                 'has_bad_patient_info',
    # Predicate matching fields:
                                                                                 field description='Has Bad Patient Info'),
    products = models.ManyToManyField('order.Product', blank=True)
    payers = models.ManyToManyField('billing.InsurancePayer', blank=True)
```

### Select pricing estimate alert rule to change

Import

Export

Add

1						
ID	Description	Priority	Active	Rule summary	Add Alerts	Remove Alerts
6	Bad Patient Info 4		•	<ul> <li>Has Bad Patient Info: True</li> <li>Has Order: True</li> </ul>	■ bad- patient-info	<ul> <li>prior-auth- text</li> <li>pre-test- counseling-</li> </ul>
	! Please update your information					text low- confidence- text

We do not have your correct information on file and cannot provide you with an estimate of your outof-pocket cost with your insurance.

If you want to pay with insurance, please update your information. You can do so online below or by calling us.

If your information is not updated, or you do not qualify for insurance coverage, you will receive our cash price of \$349.00.

# Data Design / Modeling

## Data is forever

- Schemas can change, but essential content must remain meaningful essentially forever.
- Take the long view: design flexibly.
- Consider impact of schema changes on:
  - Data analysis
  - Customer support
  - Auditing/compliance

# Design for test

- Ability to anonymize
- Consider how heavyweight the fixtures
- Example: alerts

# Testing Scenarios

```
fps seq not confident in benefits:
 type: Low confidence in benefits
  product abbrv: Foresight
 description: >
   "Low confidence" estimate: Foresight sequencing claim where we don't get any
   benefits information back from insurer. Different language is displayed,
    and estimate uses worst case values assuming 100% cost sharing.
 prod claim_query: >
    InsuranceClaim.objects.filter(
      status=G.CLAIM RESPONSE PAID,
      order product slug='family-prep-screen',
     # Specifically low confidence in benefits:
      pricing_estimate__confident_in_benefit_amounts=False,
      pricing_estimate__confident_in_allowed_amounts=True,
     # Avoid default benefits claims, as these are handled by a separate scenario.
      bypassed_eligibility_lookup=False,
  requires prod data from:
    claim: 596702 # BCBS MD claim with no benefits values.
 pre actions:
    - load_anonymized_test_objects: 'claim_596702'
 pre_asserts:
    claim:
      total_charges: Decimal('123.04')
 claim: $claim_596702
 eligibility inquiry: $eligibility inquiry 1583594
 prediction engine: $prediction engine claim 596702
 post actions:
   - set_claim_state: G.CLAIM_RESEARCHED
 post_asserts:
    claim:
      cash_price: Decimal('345.67')
   pricing estimate:
      confident in allowed amounts: true
      confident in benefit amounts: false
      estimated allowed amount: Decimal('456.78')
```

# Internal Tooling

- Tool for A/B comparison of algorithm output on a given claim
- Internal view of eligibility data
- Alert import/export
- Missing: good internal estimate UI

## Conclusions

- ML only a tiny part of solution
- Edge cases dominate
- Sometimes it revisiting many times to get to a solid solution
- We're hiring!
- ROBOTS!