



Ensuring Data Accuracy in seeQer



**How careviso Verifies
& Validates Our Data**



With rising healthcare costs and increasing complexity in payor policies, delivering real-time, reliable reimbursement data is more critical than ever. careviso's seeQer platform empowers providers, patient access programs, and patients with transparent, accurate benefit and cost information before care is delivered. The engine behind seeQer is grounded in a rigorous, layered approach to data provenance and validation.

This resource outlines how we ensure the integrity of our data sources, the processes we use to validate outcomes, and how we actively respond to payor and provider feedback. It also showcases the measurable impact of our approach across various healthcare environments.





The Challenge of Accurate Reimbursement Intelligence

Common questions we get from clients include:

- *“How do you ensure seeQer’s information reflects current payor policies?”*
- *“Do you measure the accuracy of pricing data and estimates?”*
- *“What happens if real-world results don’t align with seeQer results?”*

At careviso, accuracy is not a static measure; it’s woven into each part of the seeQer system.



Multi-Layered Verification of seeQer

To ensure accuracy, seeQer integrates validation framework that includes source-level integrity, systemwide audits, and claims comparison.

Validation with Provider Partners

careviso works directly with physician offices and specialty clinics who share real, anonymized claims data with us on a recurring basis. This allows us to:

- Compare seeQer out-of-pocket estimates, coverage determinations, and benefit structures against actual claims
- Identify patterns in payor behavior
- Calibrate our algorithms based on observed discrepancies
- Respond in real-time when anomalies are flagged

This direct connection to actual claims ensures our solution isn't only theoretically correct, but practically reliable.

Cross-Referencing Machine-Readable Files

In alignment with the CMS Transparency in Coverage mandate, we actively download, parse, and normalize machine-readable pricing files (MRFs) from major payors. Our data processing pipeline includes:

- Parsing GZIP-compressed JSON files
- Deduplication and normalization using structured rules
- Enriching data with external sources (e.g., CMS HIOS, provider NPIs)
- Outlier removal and representative rate selection logic

These datasets power seeQer's visibility into in-network negotiated rates and are updated regularly to reflect the most current payor rates.

Drug Setup and Pre-Launch Validation

When a new drug or CPT code is added to the seeQer system, it undergoes a multi-step validation process:

- Multiple manual and automated reviews
- Mapping of benefit pathways across medical benefit plans
- Structured configuration of pricing and eligibility rules

Only after this meticulous validation process is a specific therapy made visible to users.

To ensure the multi-layered verification of seeQer results in accurate data, we have several specialized teams: Product, Data Analytics, Clinical Operations, and Engineering, each with a distinct role.

While careviso is a technology company, our platform is powered by the skilled, innovative people behind every automation, data set, and proprietary algorithm.

We maintain a regular and rigorous update schedule for our data, giving users confidence that seeQer relies on the most current information available.

Update Schedule

Data Sources & Processes	Update Frequency
Payor MRFs + Policy Documents	Quarterly
Claims Data from Provider Partners	Quarterly
Cross Validation & Rule Audits	Quarterly
Proprietary Databases Refresh	Varies: Daily to 6 months

Results from Real-World Validation

Our efforts in validation are yielding tangible results, most notably:



>90% accuracy in predicting comprehensive coverage, financial outcomes, and requirements compared to real-world claims

In addition to:



Efficient and timely resolution of discrepancies through engineering and product collaboration



Adoption among high-volume pharmaceutical patient access programs, especially for oncology, rare diseases, and specialty drugs requiring medical benefit investigation

These results demonstrate that our proactive approach to data accuracy is delivering measurable value.





4+ Years of Reimbursement Accuracy

Since 2021, seeQer has been deployed across national laboratory workflows and integrated with thousands of provider offices. We've supported the launch of dozens of therapies, with each requiring a tailored benefit strategy, payor mapping, and validation flow.

Over four years of real-world usage has given us unmatched visibility into how payors behave, how data flows across systems, and what patients and providers need before care is delivered.

We have offered a comprehensive solution to the pharmaceutical market since December 2023 and have over 300 drugs on the seeQer platform today.

Accuracy by Design, Proven in the Real World

careviso's seeQer platform is a highly accurate, innovative platform designed to make healthcare more streamlined. Our commitment to accuracy is foundational to our mission of improving access to care.

We vet, clean, and validate data. We monitor and act on payor changes in real-time. We prove our accuracy with our robust results and strong partnerships.

For case studies, reports, or a demo of seeQer's accuracy in action, visit:
www.careviso.com



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