

 **Navigation**

Choose a page:

 Fraud Prediction

▼




Healthcare Claims Fraud Detection System



Fraud Risk Assessment




Enter Claim Details


 Patient Age

45


-


+




 Provider Type

Hospital







 Claim Amount (\$)

15000.00


-


+




 Patient State


CA







 Patient Gender


Male







 Provider State


CA






 Advanced Options

▼

 Analyze Fraud Risk



Risk Guidelines

 Overall Fraud Rate

24.9%

of all healthcare claims

 **High Risk**

✓ Analysis Complete!

Fraud Probability	Risk Level	Model Confidence
31.0%	RISK	87.1%
↑ 16.0% vs avg		

● LOW RISK

Fraud Probability: 31.0%

Recommendation: Standard processing

🔍 Risk Factor Analysis

⚠️ High claim amount

Indicators:

- Very high claim amounts
- Unusual provider patterns
- Geographic inconsistencies
- Rare procedure codes

✓ Low Risk

Indicators:

- Standard claim amounts
- Established providers
- Common procedures
- Consistent geographic data