



# Automated Eligibility & Benefits Verification

## About

The client is the largest physical therapy company in the U.S. with more than 6,000 clinicians on staff. The client serves more than 400,000 patients and has over 200 sports medicine contracts.

## Challenge

Managing eligibility and benefits verification was an ongoing challenge for the client. Its agents were spending hours on the phone calling payers or on the payers' portals searching for coverage information. The client needed a way to make the process more efficient in order to provide more effective service to its provider customers. Errors in the eligibility verification process can lead to denials and unnecessary write-offs if a patient wasn't covered for a service rendered.

- Staff was spending too much time on hold with payers or searching payer portals.
- Frequent payer portal downtimes were delaying workflows.
- They were dependent on multiple payer portals for large scale portal password and ID credential management.
- Human error was an ongoing challenge.
- Manual data entry was prone to human error.

## Solution

Omega Healthcare automated the secure retrieval of eligibility and benefits information. This removed the potential for human errors and made managing verifications more effective, enabling faster, more accurate verifications so the client's provider customers can get paid on time and in full while better serving their patients.

- UI-based automation compensated for fallouts from API-based retrievals.
- API/BOT-based approach enabled single-window offline eligibility verification, improving the speed to securing eligibility and benefits information.
- Leveraged a BOT to identify claims denied due to issues with eligibility or benefits.
- Even with a huge inventory, eligibility verifications took only minutes.

## Benefits

With Omega Healthcare, the physical therapy company streamlined its eligibility and benefits verification process and was able to better serve its patients and support its sports medicine contracts.

- ✓ Averaged 2,500 eligibility verifications an hour
- ✓ More accurate and faster claim resolution in HIS systems
- ✓ Reduced eligibility or benefits-related claim denials
- ✓ 100% HIPAA compliance
- ✓ 25% reduction in per-claim processing by eliminating the need for calls with payers to verify eligibility and benefits.
- ✓ Single window retrieval removed the need to manually manage portal password and ID credential management
- ✓ Reduced human errors