

TAKE CONTROL OF YOUR MEDICARE BILLING

ABILITY EASE Medicare helps providers (including home health agencies, hospices, skilled nursing facilities, hospitals and FQHCs) automate their Medicare billing management. With **ABILITY EASE Medicare**, you receive advance alerts for receivables at risk, have easy eligibility look-ups, and benefit from an automated process for correcting complex and multi-step claims.

You'll also spend less time and money on audit and Level 1 and 2 appeal processes. **ABILITY EASE Medicare** provides secure electronic delivery of ADRs, RAC audits, appeals and medical documentation, and tracks status of all appeals with a single online dashboard.

With **ABILITY EASE Medicare**, you get improved cash flow management with a better understanding of your receivables at risk.

**ADVANTAGES FOR YOUR ORGANIZATION**

Eliminate delayed and lost revenue – Automate time-consuming processes: checking Medicare eligibility and claim status, fixing rejected claims, and more

Gain greater visibility and control over A/R and payment information – Easy workflow and user-friendly reports help you manage cash flow projections, Medicare claims and eligibility issues. In addition, the analytics feature drills down further, with reports that provide you with:

- Real-time visibility into actual payments and forecasted revenue
- Timely information on Key Performance Indicators (KPIs)
- Continuous awareness of potential revenue leakage

Monitor eligibility information on an ongoing basis

- Get weekly automatic checks to verify Medicare eligibility status and Medicare as a secondary payer

Automate ADR, RAC audit and appeal submissions

- Receive automated alerts for ADRs and RAC audits
- Assemble and upload documents, then submit via the HIPAA-compliant electronic portal
- Use a simplified tool to fully track status of ADR responses, RAC audits and appeals

Generate A/R reports across multiple NPIs/business units – Get a summary of all claims statuses or drill down to itemized claims status



APPLICATION FEATURES

Comprehensive billing management –

Full reporting capability with easy, analytical support showing status of Medicare revenue: claims stuck in suspense, eligibility issues, T status claims, overnight summary report and unpaid claims report

Secure, electronic medical documentation submission and tracking for ADRs, RAC audits and appeals management

Automatic eligibility status checks, including HMO, Medicare Advantage plans, Medicare as a secondary payer

Quick Click-to-Fix for faster, automated claims correction

Daily email informing you of Medicare dollars you'll receive that day, and expected dollars for the next day

“Move Catcher” – Weekly alerts on patients who switch between traditional Medicare, Medicare Advantage or HMO plans

Easy-to-use business analytics provide immediate, deeper visibility into revenue operations, including RTP analysis

Minimal system requirements – ABILITY web-based services are compatible with current versions of industry-leading browsers

ESPECIALLY FOR HOSPICE AND HOME HEALTH AGENCIES:

- **Face-to-face benefit period tracking** manages the requirement for physician face-to-face visits
- **Weekly eligibility status checks** also automatically identify any overlapping service providers



The myABILITY Platform

Connect to all of your ABILITY services via myABILITY, a SaaS delivery offering within the Inovalon ONE[®] Platform that gives you on-demand access to everything you need. Whether you need quality analytics, eligibility and claims, revenue cycle management or workforce management services, ABILITY can help your clinical, financial, operational and administrative areas work more effectively and efficiently.