



OPEN ENROLLMENT

THE UNWELCOME SURPRISE: PATIENT INSURANCE CHANGES



THE SEASON OF SURPRISES

It happens every year. Jan. 1 comes around, and suddenly your billing process is thrown for a loop.

If you want to avoid denied claims from undetected patient insurance changes, you've traditionally had only two options:

- **Manual eligibility revalidation.** Is someone in your organization manually rechecking eligibility for the entire patient census? It's a common approach, but it won't help you with changes that occur later in the year. It's also a major time investment.
- **Crossing your fingers.** You probably make quite an effort to educate patients that they need to inform you of their insurance changes. Now, you can only sit back and hope your message got through.

WHAT'S AT STAKE?

The best-case scenario when you don't catch an insurance change is that your reimbursement is delayed. If payment is denied altogether, you face an unpleasant choice:

- **Surprise the patient with a bill.** Patients will never forgive or forget the healthcare provider who sends them a statement with an unexpected charge.
- **Write off your services.** You may provide exceptional care and have little to show for it at the end of the month due to uncompensated care.



YOU'RE NOT ALONE



In January, a lot of people change insurance. But, we don't learn about it until after the fact. We ask our patients and their families to talk to us if they decide to change insurance. But unless someone goes in and checks eligibility, we might not know the patient has changed plans.

—Admissions Coordinator



INVESTING IN A RELIABLE SYSTEM FOR VERIFYING ELIGIBILITY

If you're torn between spending hours on manual revalidation, or doing nothing and hoping for the best, you should know you have a third option.

Many facilities use a software application such as ABILITY COMPLETE® to perform eligibility checks automatically and to rerun checks on a recurring basis. These services often pay for themselves by preventing claim denials and can be used to:

- Do a batch check of your patients at the start of the year
- Alert you when a patient's coverage changes or they become non-eligible
- Automate large one-time or recurring batch eligibility checks
- Check eligibility before providing service
- Speed up verification with easy, accurate, real-time checks of insurance and benefits
- Verify eligibility for multiple patients and payers in one session with one sign-on
- Check Medicare only, or choose to check commercial, Medicare Advantage and Medicaid payers and HMOs



EXCEPTIONS MAKE ELIGIBILITY A YEAR-ROUND ISSUE

While January is the most common time for insurance changes, patients in special situations can change their coverage at other times, making it necessary to be alert year-round.

- **Dual-eligibility.** Patients eligible for both Medicare and Medicaid can join, switch or drop a Medicare Advantage plan at any time of year.
- **5-Star Medicare Advantage plans.** Medicare Advantage plans with the highest rating on quality can enroll patients year-round.
- **Qualifying events.** A variety of situations allow individuals to make a mid-year change in their health insurance, including:
 - + Loss of other coverage
 - + Marriage
 - + Birth of a child
 - + Moving to another state
 - + Divorce from an employee with an employer-sponsored health plan
 - + End of employment for someone with an employer-sponsored health plan



HAVING A SYSTEM FOR VERIFYING ELIGIBILITY HELPS YOU:

- Bill the correct payer the first time
- Receive prompt reimbursement
- Improve cash flow
- Reduce denied claims after a patient changes health plans
- Reduce time spent resubmitting claims to the patient's new health plan
- Reduce write-offs
- Reduce patient bad debt



A woman with blonde hair tied up, wearing glasses and a light-colored t-shirt, is smiling and looking at a laptop. The background is a soft, out-of-focus indoor setting. The entire image has a light green tint.

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Eligibility software is definitely an asset. The more we can do ahead of time to determine eligibility, the better off we are. And the less I have to write off on the back end.

—Terry N.

**Director of Finance,
Walla Walla, Washington**



WE CAN HELP!

With ABILITY applications, you can improve efficiency, increase cash flow and maximize your revenue.

For more information, visit our [Resource Center](#) or [contact us](#).