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Multi-Site and Enterprise Teams

The new year brings insurance changes. Are you ready?

Coverage resets, new payers, and rising volume put pressure on every site and every team.

1 Score your setup

	Yes	Not sure	No
Can you confirm eligibility before care begins?	☐	☐	☐
Do you re-check coverage at set points throughout the care journey?	☐	☐	☐
Can you find coverage that a patient or resident didn't tell you about?	☐	☐	☐

2 Pull your baseline

	Your number
Share of visits verified before service	
Denials tied to eligibility or coverage	
Weekly hours spent sorting out coordination of benefits	



Start with your first No or Not sure.

A coverage gap moves from registration to the claim to the statement, so fix the earliest one first. Your baseline, including the gaps between sites, shows where it is already costing you.

3 Check where the gaps are today

Question	What good looks like	Covered	Gap
If the first payer does not confirm coverage, does it try a second and third automatically? **Why it matters:** Manual rechecks take time from high-value work.	Automatic eligibility checks, with no extra steps.	☐	☐
How are coverage and demographic changes caught between visits, not just at intake? **Why it matters:** Coverage changes after booking are easy to miss.	Changes flagged automatically on every batch, not just the first time.	☐	☐
Does claims scrubbing update automatically with payer and CMS rules? **Why it matters:** No one can track every rule change by hand.	Rules update, and errors are flagged and surface before the claim goes out.	☐	☐

Want a second set of eyes on your answers? Talk to an Inovalon RCM expert or your account team.

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Your Guide to Closing the Gap

	What teams like yours tell us	How Inovalon helps · Built for scaling teams
Before visit **1,000+** payers to verify insurance benefits[1]	**"One issue is patient coverage verification. This is an issue with both internal staff as well as patients being unaware of their own coverage."** – C-Suite, Health System	**Eligibility Verification Standard** confirms active coverage across 1,000+ payers before the visit and automatically flags insurance changes every rerun.[1] **Insurance Discovery and Demographic Verification** find missing demographic details and previously unknown coverage. Together, they fix 60% of incomplete demographic details and lift insurance match rates to over 14%.[2]
Claims paid **98%+** first-pass payer acceptance[3]	**"Staff spends countless hours refiling claims, researching and submitting additional information."** – C-Suite, Hospital	**Claims Management Pro** scrubs claims by payer before they go out, with 98%+ first-pass payer acceptance.[3] **RCM Intelligence** shows where denials cluster by site. **Claims Management Medicare Pro** pulls Medicare Part A claims from Medicare's Fiscal Intermediary Standard System (FISS) in real time, now and 12 months back, so stalled claims do not sit unseen.
Balance paid **25%** average lift in cash flow[1]	**"Ensuring we are paid for the services we provide so we can keep our community health system viable for years to come."** – Director, Health System	**Patient Statement Management** sends easy-to-read paper and digital statements with a QR code, so patients, residents, and caregivers can pay right away. If you print in-house, the PDF export add-on lets you download the whole batch at once. **Patient Payment Management** lets patients, residents, and caregivers pay online through a secure payment experience. Together, enjoy a 25% average lift in cash flow and 33% fewer payment admin hours.[1]

Proven in the field

$963K

behind goal to $3M ahead in 60 days

"The revenue turnaround that Inovalon provided to us was the fastest I've ever seen."

– Margaret Hardman, Senior Director of Patient Accounting
Kern Medical

Talk to an Inovalon RCM expert or your account team about your next step.

1. Internal reporting, Inovalon, October 2026. Individual results may vary.
2. Internal reporting, Inovalon, March 2026.
3. Internal reporting, Inovalon, Claims Management Pro, January 2026.