

INSURANCE VERIFICATION SERVICES

The smart way to increase your revenues



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INSURANCE VERIFICATION

Client Profile

- Our client is a heath care consultancy specializing in assisted living and long term care
- Focuses on advising and assisting the client-nursing facilities they work with to maintain an exemplary relationship in providing the very best in patient care and high standard of care

Project Description

- The client was unable to check insurance eligibility on time for geriatric patients and all assisted living members. This was causing a delay in delivering their services
- The client approached us for help getting their insurance verification and authorizations centralized for all their 65+ facilities

Rawhide Edge

- Rawhide organized a team specifically for this client and assigned them a project manager.
- Given the nature of the care and to develop a list of the information needed for verification and authorization, we needed to create a protocol to obtain the correct information from insurance companies. We started getting information by checking the insurance carrier's website and calling their representatives. We developed a list of questions to elicit this information. Based on our verification procedure, we obtained the following information and updated the same on their web portal -
 - Check facility is in-network or out of network
 - $\circ~$ If Facility is out of network– Check if plan has out of network benefits
 - Check for group # and plan effective date
 - Check for days available for SNF
 - Check for patient liability (Copay, Deductible , Coinsurance and OOP)
 - Check whether referral is required
- Check for prior authorization is required and obtain phone # or fax#, needed to obtain authorization
 - gathered information like patient demographics, provider info, patient medical records, CPT codes,
 ICD 10 Codes and other critical documents which are required to be sent to the insurance
- Since turnaround time was crucial, we set up quality assurance schedules. All results were subject to stringent quality assurance before they were delivered to the client.

Results

- We are averaging about 15000 verifications and authorizations (combined) per month
- The process is centralized for all of their 65+ facilities
- The eligibility verification was completed successfully and within the stipulated time
- The information we obtain is updated directly on the client portal
- · Administrative denials have decreased and upfront collections have increased

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