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PRACTICE PARTNER®

Product Bulletin:
Electronic Eligibility Verification

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The Practice Partner Clearinghouse powered by RelayHealth now offers electronic eligibility verification, a service that allows real-time access to patient insurance status including co-pay amounts and deductible information. There are two methods for obtaining electronic eligibility verification with the Practice Partner Clearinghouse - verification through an integration feature within the Practice Partner Appointment Scheduler and Medical Billing applications, and on-line verification through RelayHealth's Collaboration Compass Web portal. This bulletin describes both the integrated and on-line electronic eligibility verification processes.

What are the benefits of Electronic Eligibility Verification?

- **Improves productivity**. Electronic eligibility checking significantly reduces or completely eliminates the manual phone verification process typically involved in insurance eligibility checking.
- **Improves office cash flow**. You can check eligibility before services are rendered and you can make other payment arrangements before the patient arrives at your office. This helps reduce the collection and billing costs for patients without coverage, and minimizes the risk of uncollected balances.
- **Better patient-physician communication**. With electronic eligibility verification you can inform patients prior to the visit that their insurance carrier will not cover the requested service. This helps set the patient's coverage expectations.

How does Electronic Eligibility Verification work?

Method 1 – Verification through the Appointment Scheduler & Medical Billing Integration

Electronic eligibility verification is integrated within Medical Billing and Appointment Scheduler Version 9.1 or higher, meaning eligibility can be verified directly from the Practice Partner applications.

When a patient calls to schedule a visit, a staff member can instantly check the patient's insurance eligibility from Practice Partner Appointment Scheduler or Medical Billing. An electronic request from your practice to the payor is transmitted over a HIPAA-compliant, encrypted Internet connection between your workstation, server, and the data centers along the RelayHealth network. Eligibility results—such as co-pay and deductible amounts—from the payor travel over the same secure network back to your workstation.

When utilizing the full integration, when a patient schedules an appointment or arrives at your practice, a staff member can instantly verify the patient's eligibility for the scheduled services inform Practice Partner Appointment Scheduling or Medical Billing. The software instantly receives eligibility information which is displayed in the Eligibility Results screen. The results screen shows information such as the coverage level, the deductible amount, whether the patient is in the network, and insurance stop loss. Note that the coverage information does vary by payor.

Image 1.0 – Patient Appointment Screen

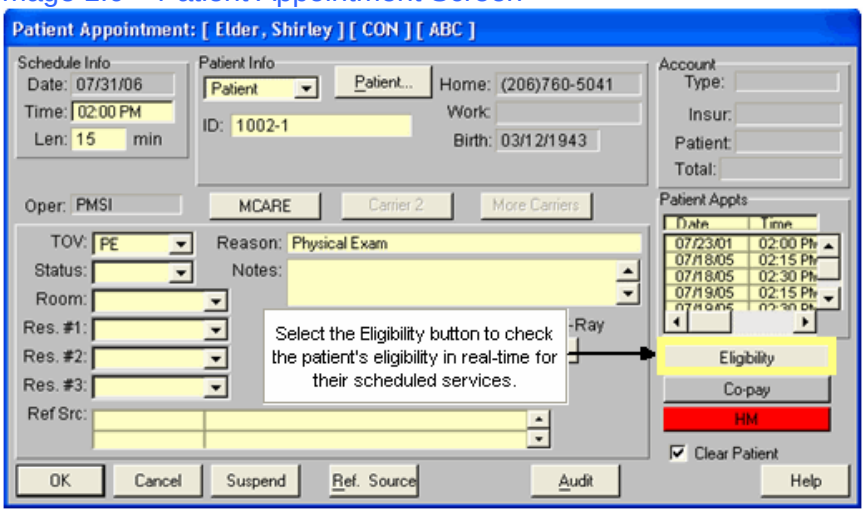
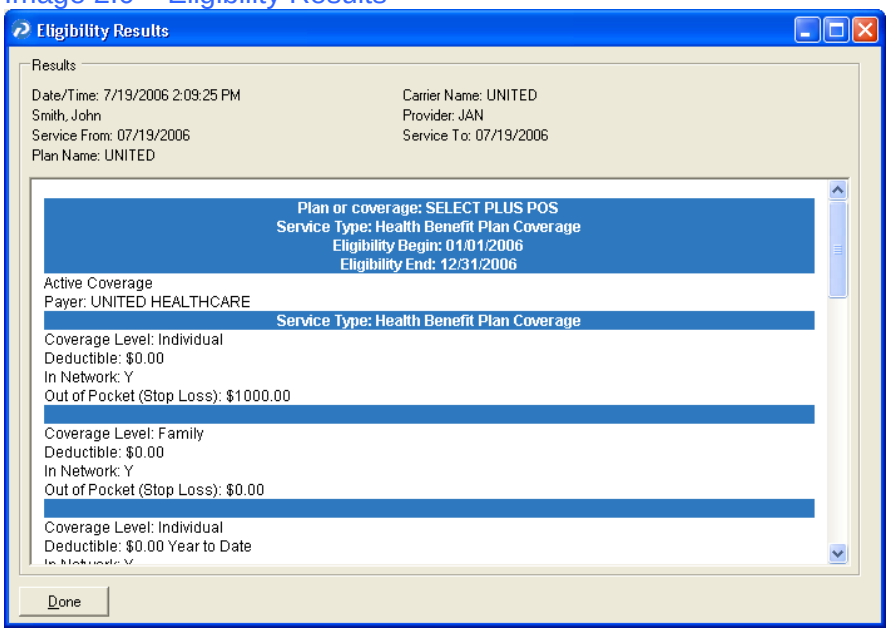


Image 2.0 – Eligibility Results



Method 2 - On-line Verification through the Collaboration Compass Web Portal

Eligibility can also be verified by simply logging into RelayHealth's Collaboration Compass Web Portal (www.collaborationcompass.com) which can be accessed from the Practice Partner Clearinghouse Web site. Through the Web portal eligibility verification enables a healthcare organization's scheduling, admitting and patient account staff to obtain insurance information when and where they need it – anywhere in the health enterprise. In addition to verifying benefits, an inquiry response can include patient demographics, member and subscriber ID, coverage status and co-payment amounts.

Image 3.0 – Collaboration Compass

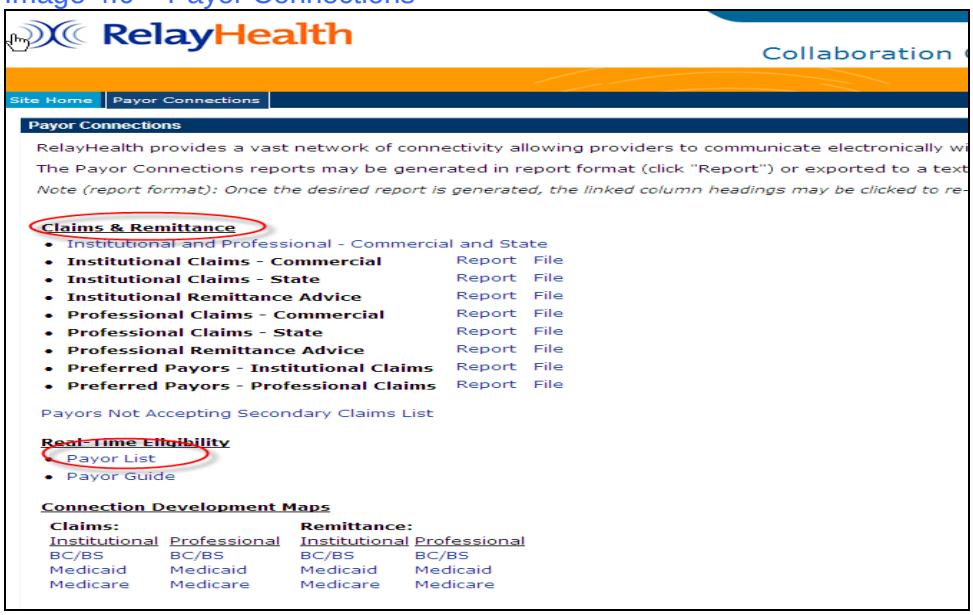
What are the requirements for using Electronic Eligibility?

Practices must be enrolled with the Practice Partner Clearinghouse and using Medical Billing or Appointment Scheduler Version 9.1 or higher. Use of the Clearinghouse also requires an Internet connection.

Which payors provide Electronic Eligibility through the Practice Partner Clearinghouse?

The Practice Partner Clearinghouse receives electronic eligibility from hundreds of payors. Visit the Collaboration Compass Web site www.collaborationcompass.com and click on the "Payor Connection" tab for a complete list. Please note that some payors are not yet ready to receive HIPAA-compliant eligibility queries.

Image 4.0 – Payor Connections



What is the pricing for Electronic Eligibility?

The prices below are for the package of Claims, ERA and Eligibility – sold separately prices may be higher.

Per Provider/per month	RelayHealth Pricing
Claims	$50
Electronic Remittance Advice	$20
Eligibility	$20
Paper Claims	$0.55/print

How do I begin using Electronic Eligibility?

The first step is to enroll with the Practice Partner Clearinghouse by completing the Practice Partner Clearinghouse Customer Agreement. Once the agreement has been received, an enrollment coordinator will contact your practice to being enrollment.

If you are already enrolled with the Practice Partner Clearinghouse, contact your account manager or email our EDI enrollment team at edienrollment@practicepartner.com.

What if I have additional questions about Electronic Eligibility?

For more information, contact your account manager or call Practice Partner at 206.441.2400. Practice Partner will provide you with the necessary paperwork and instructions to begin receiving electronic eligibility responses.