

Accelerate your billing cycle via Outsourced Eligibility Authorization

Insurance verification and eligibility authorization two of the most important aspects of medical billing are off late feeling the brunt of rising healthcare costs. Not just cost, but the accuracy and timeliness in filing claims is also taking a toll due to inefficient verification and authorization services.

However, as everything under the sun today has a solution, so does the verification and authorization process. [Outsourcing Insurance Verification](#) and eligibility authorization not only reduces claims denials on procedures performed, but also increments collections by helping you determine the exact co-pay, deductible and out-of-pocket expenses. This helps to make up front collections from patients during their visit.

Checking eligibility authorization is imperative with regards to giving covered services to your patients. When effectively performed, the procedure enhances your incomes and improves the patient satisfaction. Today, most of the healthcare insurance experts don't know about the complexities of the verification and authorization process or the in-house staff is so pre-occupied that they can't perform those duties productively. If such a scenario persists then circumstance of delayed payments, non-payment of claims and at last, patient dissatisfaction is what you will get.

Outsource to Significantly Reduce Rejections and Denials

To get rid of the tedious work of overseeing insurance qualification authorization errand, it is ideal to outsource insurance verification process via a third-party approach. This can get your claims charged and prepared precisely, plus all the worries with regards to eligibility authorization are also put to rest. Today, there many options available to outsource the undertaking which guarantees that all your vital printed material or paperwork is completed speedily for timely repayment. The professionals at the outsourced organization will work with patients, insurance payer staff and the insurance agency to meet your confirmation requests.

Offshore [Eligibility Authorization](#) organizations have the expertise to carry out the confirmation of patient details, coverage available, co-insurance details, deductible elements, out of pocket costs, pre-authorization number, pre-accreditation details, claim mailing information, agent information, IP benefits and claims details to avoid last-minute denials to ensure a streamlined claims processing.

What is the Eligibility Authorization Process?

The insurance verification and authorization process includes:

- Getting patient schedules from the healing facility or centers by EDI, email or fax
- Checking patients' insurance coverage on all essential and optional (if relevant) payers
- Checking the demographic data
- Updating patient accounts
- Contacting patients for additional information (if required)
- Updating the billing framework with qualification and benefit details such as group ID, member ID, coverage life-cycle, end dates, co-pay data and much more.

Benefits of outsourcing eligibility authorization

Outsourcing your insurance eligibility authorization work to specialists spares time and enhances your revenue cycle. It additionally accelerates approvals as well. Along with this some other benefits are:

- Lessens the risk factor
- Simplifies workflow
- Decreased number of returned cases
- Speedier billing cycles
- Minimizes delays extensively
- Enhances payment and collection
- Lessens need to revamp claims
- Makes the in-house staff to work on more productive services of the company
- Diminished operational expenses
- Lesser claims rejection

Also outsourcing aides in a few other elements pertaining the revenue generation for a center or hospital, which are:

- ◆ Outsourcing lessens regulatory/operational costs, including workers compensation and overheads.
- ◆ Outsourcing authorization process rearranges and streamlines the general restorative billing process, prompting better productivity.
- ◆ it lessens the burden of medical practitioners and boosts repayment.

So, if you want to sustain a healthy bottom line as a medical practitioner, and are disappointed with the number of claims denials, delayed repayments, outsourcing the undertaking via third-party approach is the most ideal thing to do.

Please feel free to read more on about transcription services that we offer

- [Radiology Stat Transcription](#)
- [Medical Transcription](#)
- Business Transcription
- Hospital Transcription