

Chorus Software Solutions

Eligibility

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Healthcare: Delayed eligibility checks often cause challenges downstream

Eligibility checks are a critical and routine part of any healthcare practice's operations, but fragmentation across clinical and operational workflows often means this information is delayed or inaccurate. Across the patient journey, when eligibility is not managed well, healthcare practices incur more costs, deliver more uncompensated care, and are faced with lower patient satisfaction.



CHALLENGES

Multiple points across the patient journey require eligibility determinations, but this process is often fragmented and delayed leading to higher administrative costs, uncompensated care and patient frustration. This is especially painful for behavioral health providers who provide care to patients over long periods of time when coverage changes are likely occur.

IDEAL SOLUTION

Healthcare practices should be able to accurately determine eligibility digitally, in real-time, for any payer, at any point in their workflow. When an inquiry is made, patient eligibility information should be readily available, including visibility into patient responsibility so that it can be discussed up front. Downstream, historical eligibility records should support your team with data insights should reimbursement issues arise.

DESIRED OUTCOMES

Eligibility should always be at your team's finger tips, available to inform key care decisions in real-time. This will help ensure the right care is delivered in the right way to your patients, while minimizing downstream challenges with reimbursement. Instead of experiencing confusion downstream, patients can be empowered with clear understanding of their responsibility for the care you deliver from the start.



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Eligibility

Seamlessly automate your eligibility checks anywhere in your workflow. Get accurate, on-demand eligibility status information, reducing uncompensated care and downstream billing issues while increasing patient satisfaction.

Reduce Denials

Proactively reduce your eligibility related denials by **X%** by conducting automated eligibility checks at any key point in your practice workflows and each unique patient's care journey.

Increase Workforce Effectiveness

Leave the tedious, fragmented eligibility check processes behind. By consolidating all patient data available and enabling digital, real-time eligibility checks within your existing workflows, your staff will no longer experience significant lags that slow down their care planning and delivery.

Increase Patient Satisfaction

With real-time visibility into their eligibility status, you can let your patients know exactly what services are covered and what their responsibility would be, helping inform their decisions and avoiding frustration downstream.

1. Dependent on number of remittances received digitally

Chorus Software Solutions Eligibility + Microsoft Dynamics

Eligibility leverages Microsoft Dynamics to create an open, flexible environment for data management that easily integrates with existing CRMs and practice management systems. The flexibility Dynamics offers ensures Eligibility workflows can be configured by non-technical staff to meet each practice's unique needs.



Consolidate Eligibility Data

Dynamics allows Eligibility to bring together all your critical data about your patients, enabling accurate eligibility checks at any point in the patient journey.

Automatically Create Eligibility History

Eligibility uses Dynamics to automatically create a record of every patient's historical eligibility information, offering direct visibility into a patient's eligibility at the time of service, informing downstream reimbursement analysis should issues arise.

Eligibility in Real-Time

Eligibility uses Dynamics to provide your staff with eligibility information in real-time, without requiring any tedious, manual information gathering or transmission, removing lags that slow their decision-making.

1. Dependent on number of remittances received digitally
2. Reduction in denial rates

Customer success: Encore Support Services, making Eligibility an afterthought

“Allowing our staff to check eligibility easily, in real-time, and on-demand reduced our denial rates by **X%** while also making staff **Y%** more efficient. More importantly, Eligibility has allowed us to direct our team's attention where it matters most: planning and delivering the right care for our patients.” - **Source**



Reduced Denials

By running eligibility checks easily in real-time and on-demand, Encore Support Services achieved an **X%** reduction in denials related to eligibility.

Increased Workforce Effectiveness

Encore was able to quickly deploy Eligibility across its practice and eliminate the regular delays associated with manually checking eligibility. This led to an **Y%** improvement in staff efficiency.

Increased Patient Satisfaction

Encore is now able to proactively tell patients what their eligibility status and responsibilities are for each service. This allows patients to remedy any coverage issues prior to service delivery, avoiding downstream reimbursement challenges.

Empower your business with Eligibility by Chorus Software Solutions

Visit us: <https://www.chorus.cloud/>

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