



MPV Eligibility

Automated insurance and benefits verification

MPV Eligibility electronically verifies patient eligibility, resulting in reduced denials, enhanced productivity and improved cash flow.

With patients taking more responsibility for their medical expenses, it has become increasingly important for physician groups to verify eligibility. Billing the wrong insurance carrier or not having correct patient co-pay and deductible information can result in denials, delayed payment, increased billing and collection costs, and patient bad debt—all of which significantly impact the bottom line.

MPV Eligibility offers a practical solution. Designed for optimal efficiency, MPV Eligibility electronically gathers patient co-pay, benefit and deductible information from an extensive payor network. This limits the need for practice staff to manually verify insurance information and reduces registration, co-pay and billing errors. In addition, MPV Eligibility applies business intelligence to returned data to make sure the practice is billing under the proper financial class.

To ensure that practices verify coverage for the maximum number of patients, MPV Eligibility enables users to confirm eligibility at any point in the billing process—from pre-arrival to check-in to charge entry, claims submission and payment posting. Because the system can easily incorporate a practice's business logic, more of a practice's patient volume can be processed, resulting in increased potential revenue collection. And MPV Eligibility's ability to normalize payor data minimizes duplication of information while ensuring data integrity—a critical component for accurate reimbursement.

Automating the insurance verification process allows providers to streamline front-end revenue cycle workflow and enhance efficiency. When combined with MPV's Patient Portion Pricer, a tool that estimates patient financial responsibility based on payor contract terms, physician groups are able to increase time-of-service collections, reduce patient billing and collection costs, build net cash receipts and improve patient satisfaction.

MPV Eligibility features:

- **Flexible, Web-based platform:** Because MPV Eligibility is Web-based, there is no need to purchase hardware or software. The system can be installed quickly, and its built-in flexibility means it can adapt easily to changes in business procedures.
- **Automated transaction processing:** All tasks necessary to complete EDI transactions are automated, virtually eliminating the need for human intervention. When staff arrives in the morning, only those transactions that have not passed the business rules are flagged for attention. The billing system is automatically updated during hours chosen by the practice, further maximizing productivity.

5000 Plaza on the Lake
Suite 265
Austin, TX
78746
tel 512.795.0015
fax 512.795.9529
www.mpv.com



Medical Present Value

1-866-930-1230

www.mpv.com

- **Workflow management:** For many practices, a percentage of electronic transactions—typically 5% to 20%—will not file into the practice management system and the resulting volume of rejected transactions can be significant. MPV Eligibility's online work queues, which are customizable by department, allow providers to easily correct and resubmit rejected transactions for enhanced workflow.
- **Improved self-pay verification:** Self-pay patients can be matched against Medicare and Medicaid databases to determine eligibility, providing additional reimbursement opportunities.

MPV Eligibility benefits:

- **Fewer denials:** MPV Eligibility manages both primary and secondary insurances to ensure that billing is correct and has been sent to the proper payor, resulting in fewer claim denials.
- **Reduction in A/R days:** The system not only validates that the patient has coverage at the requesting provider, but also verifies whether coverage is in or out of network, whether the patient is covered for the requested procedure, and if pre-certification is required. This helps ensure accurate billing, eliminating the need to resubmit claims and reducing the number of days from billing to collection.
- **Increased cash flow:** Access to correct billing information means increased upfront collection of patient fees and fewer resources required for billing and collections, freeing up cash for other functions.
- **Enhanced efficiency:** Automating the eligibility process streamlines workflow, reduces paper-work and enhances billing accuracy, meaning less staff time is required for billing and collections.
- **Fewer collection calls to patients:** Because patients are aware of their coverage, co-pays and deductibles at the time of service, misunderstandings are minimized, resulting in fewer payment delays and less need for billing follow up.
- **Cleaner billing system data:** The system ensures that eligibility information is always accurate and up to date as of the last patient visit, simplifying data management and reducing the chance of billing errors. Nearly 100% of clients using MPV Eligibility experience significant cleanup of their data during the first three months of use.

About MPV

MPV helps medical groups to maximize practice revenue and meet the demands of healthcare consumers by combining technology and consultative services to fully automate eligibility verification; reduce patient write-offs; monitor payor contract compliance; recover underpayments and negotiate better contracts.