

New ABILITY Product Offers Hospital Administrators Real-Time Benefits Verification Solution

ABILITY CHOICE Eligibility streamlines eligibility and benefit confirmation to ensure faster payment

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About ABILITY

ABILITY works to save lives by facilitating information exchange and knowledge-sharing among every participant within the healthcare spectrum – hospitals, physician practices, home care providers, DMEs, and private and government payers – as well as the Centers for Medicare and Medicaid Services (CMS). In use for more than a decade in more than 3,000 hospitals across the country, ABILITY's network supports healthcare decision makers in their quest to promote care coordination and collaboration, reduce record fragmentation, participate in new and emerging care models, and access the Direct Project network and state and community-based Health Information Exchanges (HIEs). Follow us on [Twitter](#), [LinkedIn](#) and [Facebook](#).

MINNEAPOLIS, Minn. – June 23, 2011 – ABILITY Network Inc™, the nation's largest and most secure web-based health network, announced today the launch of **ABILITY CHOICE Eligibility**, a solution offering real-time, patient eligibility and benefit verification. The previous process of calling various payers to determine a patient's eligibility is now replaced with fast, automated access to eligibility and medical benefit information from hundreds of payers, including Medicare and Medicaid. Eligibility is the first solution to be offered as part of the **ABILITY CHOICE** product suite.

A multi-delivery model, ABILITY CHOICE Eligibility can be implemented with an Admission Discharge Transfer System (ADT)/Health Information System (HIS), allowing users to receive requests and transmit responses in real time. It is also available on a web-based intuitive application that acts as a 270/271 translator, allowing users to perform eligibility determinations to the user's choice of payer through a single-user interface.

“Prior to ABILITY CHOICE Eligibility, admissions staff would spend their day making multiple phone calls and end up enduring long hold times or becoming disconnected when attempting to determine a patient's eligibility and benefits,” said Mark Briggs, CEO of ABILITY Network. *“ABILITY CHOICE Eligibility will give our clients instant access to check multiple patients' eligibility at one time with all payers, including third party administrators, ultimately saving time and reducing our clients' administrative workload.”*

Checking eligibility verification to all payers is made simple through a single-user interface with one login and ID. Secondary payers can also be identified with the coordination of benefits feature, which includes patient information on behavioral, chiropractic and dental benefits. Additional features include deductible and benefit maximum tracking and multiple search criteria options.

According to a current ABILITY client, “Making daily phone calls and having to wait to check on a patient's eligibility takes more time than it should, especially on days when we have a handful of patients we need to get through. Now, we have instant access to this information and can check for multiple patients at once, giving us the information we need in order to receive proper and timely reimbursements.”

Additional benefits of ABILITY CHOICE Eligibility:

- Streamlines eligibility and benefit confirmation to ensure faster claims payment
- Identifies patient eligibility at the onset of patient's stay, facilitating faster reimbursement and cash flow
- Increases revenue by validation of eligibility
- Decreases claim rejects and returns as it bills the correct payer the first time



ABILITY™

Elevating the healthcare conversation

For more information about the ABILITY or to join an on-line meeting, please visit www.abilitynetwork.com or contact sales@abilitynetwork.com.