Insurance Verification Checklist for Front Desk Teams

At Scheduling (when patient calls to book):

1. Ask for **primary and secondary insurance information** upfront.
    - "Can you please provide the name of your insurance, your member ID, and group number?"
2. Enter information into your practice system **while the patient is on the phone.**
3. Run **real-time eligibility** (through your EHR, clearinghouse, or payer portal).
4. If coverage isn't found:
    - Politely ask the patient to confirm with their insurance company.
    - Schedule the appointment tentatively until verified.
5. Confirm if the patient has **secondary insurance** (common with Medicare and COB patients).

Before the Appointment (72 hours prior):

1. Verify eligibility again for both primary and secondary insurance.
2. Check if **prior authorization** is required for scheduled services.
3. If coverage fails or prior auth is missing, **call the patient immediately** to confirm insurance or reschedule if needed.

Day of Appointment:

1. Ask patients to **bring all insurance cards** (primary and secondary).
2. Scan and upload cards into the patient chart (if not already on file).
3. Reconfirm eligibility if necessary (especially for new patients or recent insurance changes).

Why This Matters:

- Fewer denials and faster payments for providers.
- Less stress for front desk teams.
- No surprise bills for patients