

Medical Billing Professionals Support Suite

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Change to Insurance Verification Policy

This notice is for our Platinum Service providers only.

Some providers may not submit any billing for a patient after receiving results of the insurance verification. For example, a patient may not have any out of network benefits OR a patient may have a high deductible that makes it not worthwhile to submit any billing for the patient.

- In cases like the above, **starting September 1, 2017 if a provider fails to submit at least one claim for a patient within 10 days of the date of the insurance verification, the provider shall be charged \$9.95 for the verification.**

If your office is unsure if you will be billing for the patient and you do not want to pay \$9.95 for the insurance verification, then you will want to verify benefits on your own.

Thanks,
Steve