

# Medical Billing Professionals Support Suite

[News](#) > [General](#) > [Insurance Verifications for Existing Patients](#)

## Insurance Verifications for Existing Patients

2020-01-09 - Medical Billing Professionals - [Comments \(0\)](#) - [General](#)

### Insurance Verifications for Existing Patients

This notice is for our Platinum Service providers only! A number of providers have asked us about verifying insurance benefits for existing patients. As you know under the Platinum Service insurance verification is included in the per-claim fee for new patients OR for patients who change their insurance coverage. However, verification has not been available for existing patients.

Who would you want to verify benefits for existing patients?

- At the beginning of a benefit year you will want to know if the patient's copay and/or deductible has changed.
- During the benefit year you will want to know if the patient has met his/her deductible.

Therefore, we will now offer an OPTIONAL Insurance Verification Service for existing patients. If you want us to verify benefits for an existing patient, just submit the request as you do now by sending us an email.

**The fee for insurance verifications for existing patients will be \$7.95 per verification.** If you submit a request for an insurance verification for a patient and the patient is not a new patient (or the patient has not changed insurance coverage), you will be charged the \$7.95 per verification fee.

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**A second option for providers is to enroll for the Eligibility feature in the Revenue Performance Advisor Portal.** The fee is an additional \$18 per month (\$29.95 instead of \$11.95/month). This fee allows for up to 50 verifications per month (additional verifications are 42 cents per verification). Your office can then check the benefits and deductible in real time for over 400 payers.

If your office is interested in adding the Eligibility feature to the Revenue Performance Advisor Portal, let us know. Note that many payers do require enrollment for eligibility so we would enroll you with those payers.

If you have any questions, do not hesitate to ask.

Thanks,

Steve