

# Updating a Patient's Insurance Information

Last modified on 10/28/2024 3:18 pm EDT

Keeping a patient's insurance information updated is critical to avoid delays with reimbursement for services rendered.

- To update the patient's payer information, navigate to your patient's chart
  1. **Navigation Bar > Patients > Patient List >**
  2. Select the Chart ID
  3. Select the **Demographics** tab on the left side of the screen

Your patient's profile should appear.

The screenshot displays a patient profile for Elena Kagan. At the top, there is a header with the patient's name, gender (Female), age (71 years old), and birth date (Nov. 21, 1944). A photo of the patient is visible on the left. Below the header, there are fields for Phone, Email, and Address, along with an 'Added' date of Aug. 11, 2016. A 'Last Appt' date of Tue Sep 06, 2016 is also shown. There are two blue warning boxes: 'Patient must have documented medications' and 'Patient must have documented allergies'. Under 'CDS', there is a link for 'Adult Immunization Schedule Age: 65+'. The 'Primary Provider' section includes buttons for 'New Referral', 'Fax Demographics', 'Print Demographics', and '+ Schedule New Appointment'. A navigation bar below contains tabs for 'Important', 'Demographics', 'Insurances', 'Eligibility', 'Authorizations', 'Smoking Status', 'Flags', and 'Balance'. A green checkmark indicates 'Sufficient patient demographics to bill insurance.'. The 'Important Information' section contains a form with fields for Primary Provider, Status (Active), Title, First Name (Elena), Nick Name, Middle Name, Last Name (Kagan), and Suffix. The Patient Chart Photo is currently set to 'patient\_photos/2016/08/962f20e4-83db-499c-a02b-e3f0129f971a.jpeg' with a 'Clear' button.

Within the **Insurances** tab, six insurance options can be entered into the patient's chart: Primary Insurance, Secondary Insurance, Tertiary Insurance, Auto Accident Insurance, Worker's Compensation, and Durable Medical Equipment (DME).

Select the insurance option that will be changed and you'll be presented with editable fields to enter the

information.



## Primary Insurance

A screenshot of a web form titled 'Primary Insurance'. At the top, there are navigation tabs: 'Primary Ins' (active), 'Secondary Ins', 'Tertiary Ins', 'Primary Hosp', 'Secondary Hosp', 'Auto Accident', and 'Worker's Comp'. Below the tabs is a sub-tab 'Durable Med Eqpt'. The main content area has three links: 'Default Primary Insurance' (green), 'Save to Insurance History', and 'Manage Alternative Insurances & History'. The form contains several fields: 'Subscriber is the Patient' (checkbox checked), 'Insured person is the same person as the Patient' (checkbox checked), 'Insurance Company' (dropdown menu showing 'FL BCBS'), 'Carrier Payer ID' (text box with 'SB590'), 'TPL Code' (text box), 'Insurance ID Number' (text box with 'FAKEID7263'), 'Insurance group name', 'Insurance group number', 'Insurance plan name' (dropdown menu), 'Insurance plan type' (dropdown menu), 'Insurance claim office number', 'Number visits allowed per year', 'Card issued date', and 'Primary Insurance Notes' (text area). There are also 'Insurance Photo Front' and 'Insurance Photo Back' fields with 'Choose File' buttons. At the bottom, there are 'Save Demographics' and 'Save & Close' buttons. The 'HCFA Options' section includes 'Default Onset Date', 'Default Initial Visit Date', and 'Prepopulate Last Related Visit' (checkbox).

This field is for the patient's primary insurance. Under this tab, you'll have several fields to document your patient insurance information:

- **Subscriber is the Patient:** This checkbox indicates if the subscriber or policyholder is the patient. If the patient uses a parent or spouse's insurance, this box should be unchecked.
- **Insurance Company:** This is the name of the insurance company that covers the patient. Search for the insurance company using the search box. When the insurance company is found, the box below will auto-populate with the address of the insurance company.
- **Carrier Payer ID:** Every carrier has a unique five-digit payer ID. This is required to get your claim to the payer. The **Carrier Payer ID** field will be auto-populated when an insurance company is selected from the insurance

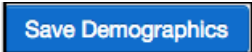
company search box or can be manually entered. The information for this field is sometimes listed on the patient's insurance card as the "EDI number".

- **TPL Code:** TPL (Third Party Liability) refers to the legal obligation of third parties to pay part or all medical expenses under a Medicaid state plan. This number is used for Coordination of Benefits (COB) Medicaid benefits.
- **Insurance ID Number:** Policy number of the insurance. Can be shown as an ID Number, Policy Number, Member ID, or Member Number on a patient's insurance card.
- **Insurance Group Name:** If the patient purchased insurance through an employer, they will belong to an insurance group. The name of the group often does not appear on the insurance card and is not necessary after entering the insurance group number.
- **Insurance Group Number:** The group number associated with the patient's insurance.
- **Insurance Plan Name:** Name of the insurance plan provided on the patient's insurance card.
- **Insurance Plan Type:** The type of insurance that the patient holds. The following options are available for selection:
  - Automobile Medical
  - Blue Cross/Blue Shield
  - Champus (Tricare)
  - Commercial Insurance Company
  - Dental Maintenance Organization
  - Disability
  - Exclusive Provider Organization (EPO)
  - Federal Employees Program
  - Health Maintenance Organization (HMO)
  - Health Maintenance Organization (HMO) Medicare Risk
  - Indemnity Insurance
  - Liability Medical
  - Medicaid
  - Medicare Part A
  - Medicare Part B
  - Mutually Defined
  - Other Federal Program
  - Other Non-Federal Program
  - Point of Service (POS)
  - Preferred Provider Organization (PPO)
  - Title V
  - Veterans Affairs Plan
  - Workers' Compensation Health Claim
- **Insurance Claim Office Number:** If the patient's insurance card includes the phone number of the office's support line, you may enter that number here. This number can be used to call the insurance company to check on the status of the claim.

- **Number of visits allowed per year:** If the patient is limited by the number of visits, you may enter that number here.
- **Card Issue Date:** The date of issue found on the patient's insurance card.
- **Primary Insurance Notes:** Any supplementary notes on insurance can be entered here.
- **Insurance Photos:** You may upload images of the patient's insurance card (both front/back) for verification purposes.

If you need to include information in HCFA box #14 (onset date) or HCFA box #15 (initial visit date) you can do it at the bottom of the screen. There is also an option to repopulate the information from the last related visit in HCFA box #19.

Once you have made the necessary changes please select the **Save Demographics** button at the bottom to save the changes you have just made.



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