Front Desk Insurance Verification Script

Exactly What to Say — Step by Step

How to Use This Script: Read the words in **bold** out loud to the patient or insurance representative. The notes in plain text explain what to do or write down. Never skip a step — missing information causes claim denials and delays payment.

Part A — When a Patient Calls to Schedule an Appointment

Step 1 — Greet the Patient

SAY: "Thank you for calling [Clinic Name]. My name is [Your Name]. How can I help you today?"

NOTE: Listen carefully. Let the patient finish speaking before you ask questions.

Step 2 — Collect Basic Information

SAY: "May I get your full legal name as it appears on your insurance card?"

NOTE: Write down the name exactly — spelling matters. Then ask for date of birth and phone number.

Step 3 — Ask for Insurance Details

SAY: "Do you have insurance that you would like to use for this visit?"

NOTE: If yes, continue. If no, explain self-pay options and fees. "Great! Can you please read me the name of your insurance company, your member ID number, and the group number from your card?"

Step 4 — Confirm the Appointment

SAY: "I have you scheduled for [Date] at [Time] with [Provider Name]. Please bring your insurance card and a photo ID to your appointment."

NOTE: Enter all information into the system before ending the call.

Part B — Calling the Insurance Company to Verify Coverage

Before You Call: Have the patient's insurance card in front of you. Call the Provider Services number on the back of the card — not the member number. Have a notepad ready to write down everything the representative tells you.

Opening the Call

SAY: "Hello, this is [Your Name] calling from [Clinic Name]. Our NPI number is [NPI]. I am calling to verify benefits for a patient."

NOTE: The rep will ask for your NPI and the patient's member ID. Have both ready.

Give Patient Information

SAY: "The patient's name is [Full Name], date of birth is [DOB], and the member ID is [Member ID Number]."

NOTE: Wait for the rep to pull up the account. Confirm they have the right patient.

Ask About Coverage

SAY: "Is the patient's plan active as of [Date of Service]?"

NOTE: Write down YES or NO. If YES, continue. If NO, stop — contact patient before the visit.

Ask About Benefits

SAY: "What is the patient's deductible, how much has been met, what is the copay for [type of visit], and is there a coinsurance?"

NOTE: Write down every number. These determine how much the patient will owe.

Ask About Authorization

SAY: "Does [specific service or procedure] require a prior authorization?"

NOTE: If YES, ask: "What is the process to obtain authorization and how long does it take?" Do NOT schedule the service until authorization is obtained if required.

Get a Reference Number

SAY: "May I have the reference number for this call please?"

NOTE: ALWAYS get the reference number. Write it in the patient account. This is your proof of verification if the claim is denied later.

Close the Call

SAY: "Thank you so much for your help. Have a great day."

NOTE: Update the patient account immediately with all information collected.

Part C — Insurance Verification Log Sheet

Fill out one row for every patient you verify. This log must be kept in the patient file and attached to the claim when submitted.

Field	Staff Entry
Patient Full Name	
Date of Birth	
Insurance Company Name	
Member ID Number	
Group Number	
Plan Active? (Yes / No)	
Date of Service Being Verified	
Deductible (Total / Met)	/
Copay Amount	
Coinsurance %	
Out-of-Pocket Maximum (Total / Met)	/
Prior Authorization Required? (Yes / No)	
Authorization Number (if applicable)	
Insurance Rep Name	
Call Reference Number	
Date & Time of Verification Call	
Verified By (Staff Name)	