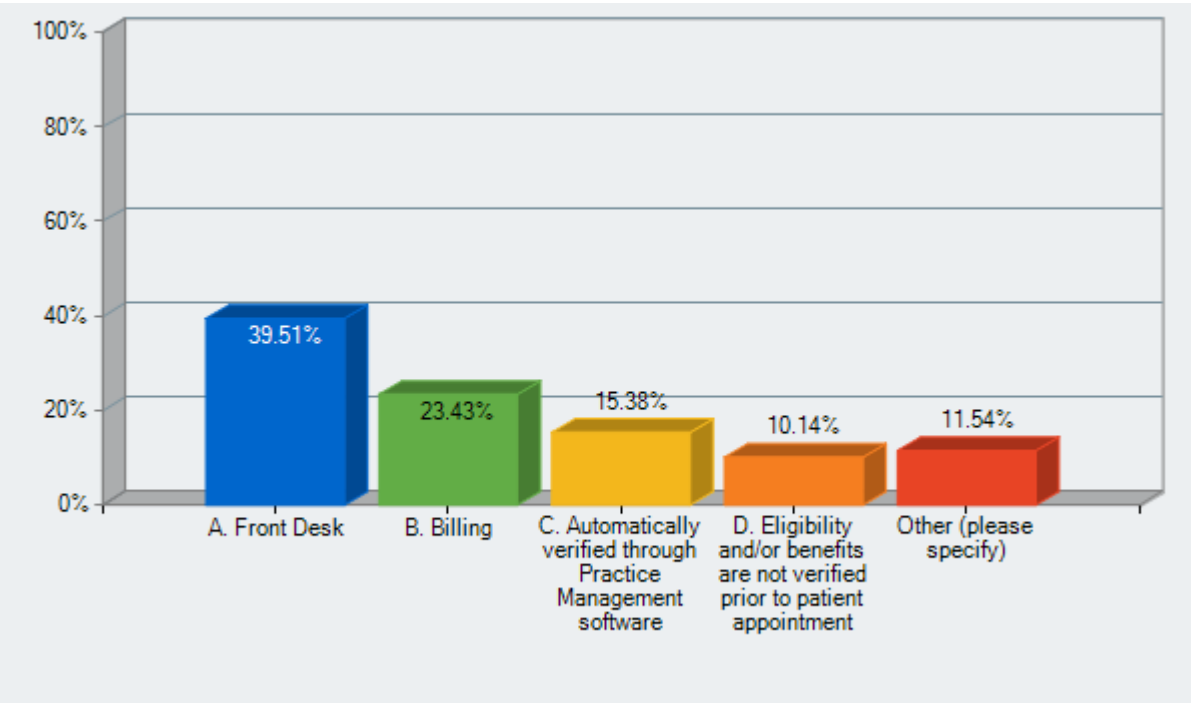




**ASOA Friday Focus Poll – Results from Friday, March 16th, 2018**  
*Insurance Verification*

**Which department in your practice verifies Insurance eligibility and/or benefits prior to a patient's appointment?**

Responses	Responses	%
A. Front Desk	113	39.51%
B. Billing	67	23.43%
C. Automatically verified through Practice Management software	44	15.38%
D. Eligibility and/or benefits are not verified prior to patient appointment	29	10.14%
Other (please specify)	33	11.54%
<b>Total Responses</b>	<b>286</b>	



## Friday Focus Poll "Other" Responses:

Billing for surgery, Front Desk for appointments, Optical for optical merchandise  
we only verify vision benefits at this time

We check Medicaid only

Both C and A

Verified in Call Center at time appointment is made, then again, if needed at Front Desk.  
insurance dept

Scheduling

phone operators/insurance verification staff

Clerical Support Staff

Verification Clerk

Insurance verification specialist

A b and c

Benefit verification department

We have a Referral Management Department that performs this task

Front Desk and billing rotate (backup) each other.

front desk biller

We out source our billing and they perform these functions

both front desk and auto verify through PM

both A and B depending upon location

Separate eligibility/referral department

both billing and auto through PMS

centralized hospital based Patient Financial Services department (not billing office) and also some department efforts

Call Center, Billing for surgery

Dedicated Staff

insurance coordinator

Both front desk and billing

Dedicated staff member

Front Desk and Billing Split the duties

Dedicated Department for this

Third Party company

Single individual/Surg Coordinators

dedicated employees