# End of Month Insurance Re-Verification Process for Long Term Residents on Therapy

Near the end of each month, go to RO reports and open up census details report.
Under Parameters:
For Date Range: Choose 'Today'
For Display Detail By: Choose 'Payer Plan'
For Payer Type(s): Check Medicare Part B and Managed Care Part B only

Then click view.

Once the report comes up, print it.
Then cross out all patients that will no longer be active in the next month.

Leave all pts that will be seen into the next month.

Then scan that report to your CPT email address.

From the CPT email address, send it to that ar_medicare email that you send Med B verifications.

[Another option is to save the census report to an Excel Document and "delete" each pt from the list that will not continue into the next month, leaving only those that will be seen in the next month. Then save that document on your computer and email it to the ar_medicare email address]

When you email it to ar_medicare, let them know this is the current list of residents for your facility that will continue therapy into the next month and they need to be re-verified.

They will then notify you if those patients are continuing with the same insurance or if they are changing Insurance plans.

If changing Ins plans you will need to get new authorization.