

# SOP: Patient Registration and Verification of Personal and Insurance Details

This SOP details the **patient registration and verification of personal and insurance details** process, covering accurate collection of demographic information, documentation of insurance coverage, validation of policy eligibility, and procedures for updating records. The goal is to ensure efficient patient intake, reduce billing errors, and maintain compliance with healthcare regulations by verifying all relevant patient and insurance data before service provision.

## 1. Purpose

To define standardized procedures for registration, demographic, and insurance verification of patients to ensure accuracy, reduce errors, and maintain regulatory compliance.

## 2. Scope

This SOP applies to all front desk staff, registration officers, and administrative staff involved in patient intake and verification processes at the healthcare facility.

## 3. Responsibilities

- **Front Desk Staff / Registration Officers:** Accurate collection and input of patient demographics and insurance information.
- **Billing Department:** Verification of insurance eligibility and coverage details.
- **Supervisors / Managers:** Oversight, staff training, and process audits.

## 4. Procedure

1. **Patient Arrival and Preliminary Greeting**
  - Welcome patient and request official identification (photo ID, previous patient card).
2. **Collection of Demographic Information**
  - Obtain and record full legal name, date of birth, gender, address, phone, and email.
  - Verify information by cross-checking with provided documents.
3. **Collection and Recording of Insurance Details**
  - Request and make copies of patient's insurance card(s).
  - Record insurance provider, policy number, group number, and policyholder's details.
4. **Verification of Insurance Eligibility**
  - Contact insurer via portal/phone to confirm policy status, coverage, and co-payment.
  - Document verification outcome and any limitations or referrals required.
5. **Patient Acknowledgment and Consent**
  - Present privacy notices and consent forms for signature.
  - Ensure patient understands provided documents and signs appropriately.
6. **Updating or Creating Patient Records**
  - Enter verified data into the EMR/EHR or registration system.
  - Flag incomplete or questionable entries for supervisory review.
7. **Updating Existing Records**
  - Upon return visits, confirm and update personal or insurance information.
  - Document any changes with date/time stamp and staff initials.

## 5. Documentation Requirements

- Maintain copies of identification and insurance cards in patient file (physical or digital, as per policy).
- Retain signed consent forms in accordance with local regulatory retention schedules.
- Document all verification steps, including insurer responses and communication logs.

## 6. Quality Assurance

- Supervisors will audit 10% of new patient registrations each month for accuracy and completeness.

- Ongoing training will be provided for regulatory updates and system changes.

## 7. References

- HIPAA Privacy Rule
- Local insurance verification regulations
- Healthcare facility policies and procedures manual

## 8. Revision and Approval

Version	Date	Prepared By	Reviewed By	Approved By	Comments
1.0	2024-06-14	[Name]	[Reviewer]	[Approver]	Initial release