



MEDICAL CODING QUICK TIP

New Insurance $\neq$ New Patient

**...and this mistake WILL
cost you!**

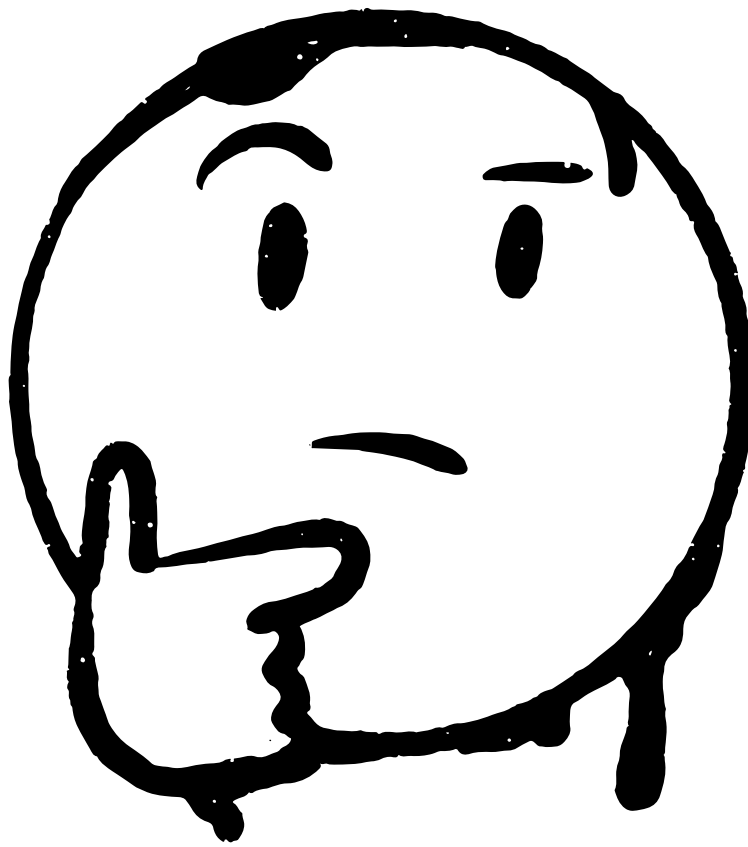
Scenario:

A patient has been with your practice
for years.

They switch insurance.

The claim is billed as a new patient...
and gets paid.

A year later — refund request.



**SO HOW DID THE
INSURANCE
COMPANY CATCH IT?**





**“New patient”
has NOTHING to
do with
insurance.**



CPT DEFINES “NEW PATIENT

--NOT THE INSURANCE

Based on provider history (3-year
rule)

Same provider/specialty =
established

New insurance does NOT reset patient status



HOW THEY KNOW

- **NPI history**
- **Patient identifiers**
- **Audit patterns**
- **Post-payment reviews**





THE RISK

- **Refund demands**
- **Downcoding**
- **Compliance exposure**



THE SOLUTION



A reliable billing process should:

- Flag prior visits automatically
- Verify patient history before billing
- Prevent incorrect “new patient” coding



PRO INITIATIVE BILLING SVCS.