



The July checkpoint ran itself, and your coverage held.

JUNE 29 - JULY 6, 2026

The top-of-month insurance verification fired on its own and confirmed coverage across your roster.

Happy Monday. The headline this week is the one that matters most for billing: **your top-of-month insurance verification ran on its own July 1 and confirmed active coverage on 590 of the 613 patients it checked, 96 percent, clearing 590 coverage flags straight back into your system.** Active care is holding steady near 645 across the four offices, and the weekly dormant sweep came back clean again, so no patient slipped out of care without being caught. The one thing worth your managers' attention is the insurance flag list, which ticked back up to 16 this week as new coverage questions surfaced. Those are exactly the charts the system is built to catch early, and they are already on the board to work.

ACTIVE IN CARE

645

patients currently in care across all four offices

holding near 650

COVERAGE CONFIRMED

96%

590 of 613 patients verified active on Ohio Medicaid, July 1

590 flags cleared

NEW DORMANT CLIENTS

0

this week's sweep checked 682 charts and found none to chase

clean roster

LIVE COMMAND CENTER

Your operation, at a glance

● Active clients by location

Cincinnati	239
Dayton	205
Columbus	118
Middletown	83
Active in care	645

● What the dashboard flagged

Scheduled assessments	18
Insurance issues surfaced	16
Discharge pending	21
Discharge pending payment	7

Surfaced automatically each evening so your managers can act on them. The insurance flags rose this week as new coverage questions came in, and they are on the board to clear.

MOVEMENT THIS WEEK

Across your four offices

The same census refresh, broken down by office, so each manager can see exactly where their numbers stand. Pulled from your live records, not estimates.

● New assessments scheduled

Cincinnati	6
Dayton	5
Columbus	4
Middletown	3
Total scheduled	18

New intakes on the calendar across the four offices, the front edge of next month's active census.

● In the discharge process, by office

Dayton	11
Cincinnati	10
Columbus	4
Middletown	3
Total in process	28

Charts flagged as moving toward discharge, most pending final paperwork or payment. This total edged up from 25 to 28, a normal turn as care wraps up and new intakes come in behind it.

ROSTER COMPOSITION

Where every chart stands

A full breakdown of your roster by status, the same view leadership sees on the live dashboard. The seven buckets add up to all 710 charts on your books.

● Current roster, by status

Active in care	645	Discharge pending	21	Scheduled	18
Insurance issue	16	Discharge pending payment	7	Awaiting assessment	2
Assessment only	1				

Active care is the large majority of your roster. The smaller buckets are exactly the charts your managers want surfaced, the ones that need a decision before they turn into a billing or coverage problem.

Staying ahead of the payers

Reframed around your authorization units, the weeks of care authorized, how much has been used, and what is left, so you can see capacity at a glance and stay ahead of every reauthorization.

● Authorization units in play

Clients with active authorizations	94
Weeks of care authorized	1,509
Used to date	515 34%
Remaining	994

A new authorization cycle opened July 1, adding weeks of authorized care, so most clients now have fresh runway. About 34% of authorized care has been used.

● Reauthorization watch

Clients near their limit (80%+ used)	7
Authorizations expiring in 30 days	20
Expiring in 60 days	48
Expiring in 90 days	81

Every authorization window is tracked so reauthorizations go in before the units run out or coverage lapses, and care never pauses.

The systems running for you

These run on their own in the background. Here is what kept working this week so you do not have to think about it.

● DAILY

Live census snapshot

Refreshes your active-client counts across all four offices. This week it held your roster steady near 645 in active care.

● DAILY

Authorization & utilization refresh

Pulls your authorization report so your units, utilization and renewals stay current. 94 clients with active authorizations, 1,509 weeks of care authorized.

● WEEKLY

Dormant-client sweep

Ran this week across 682 charts. Result: a clean roster with no new dormant clients, which means the reactivation work is keeping pace with discharges.

● MONTHLY

Top-of-month verification

Fired on its own July 1 and re-checked your roster against the Ohio Medicaid portal, with a full dated proof report.

PAST-CLIENT REACTIVATION

From email to the phones

The email campaign to win back former patients has finished its run across your entire past-client base. The dropped-referral list is now moving to a phone-first push, because reach plus a human call is where former patients actually come back.

● Emails sent, by group

Discharged patients	867
Dropped referrals	794
Prior therapy clients	82
Total emails sent	1,743

Every reachable former patient was contacted with a personalized sequence, not a single blast. Complete and logged.

● Why we are moving to calls

We took a hard look at your dropped referrals. Email alone is not moving them, just **2 interested and 0 booked** across the whole list. So the plan shifts to live phone calls, the channel that actually rebooks a former patient, with a fresh email landing right before to warm the line.

THIS WEEK'S MANUAL OUTREACH

The dropped-referral call plan

Built and in your managers' hands. Clean, color-coded call sheets for every office, sorted warmest first, each with a short script and a result dropdown so nothing falls through.

● Call sheets by office

Cincinnati	185
Dayton	63
Columbus	41
Middletown	7
Total callable	296

Sorted into priority tiers from warmest to coldest: 2 already interested, 5 hot, 69 warm, 220 cold.

● How it runs

Lisa and Domonique work each office sheet warmest-first, with a **fresh three-touch email** landing right before the calls. A small **AI-voice test on the 18 warmest** runs alongside to see whether it is worth scaling. Texting stays off until the calls prove out. We will fold the first call results into next week's update.

Ran this week, on its own

At the start of every month the system re-checks every active patient against the Ohio Medicaid portal, automatically, so a lapsed plan never turns into a denied claim. The July run fired July 1. No one had to log in or pull anyone by hand.

What it does for you

Every active patient is verified against Ohio Medicaid, the results are written **straight back into your system** so the front desk and billing see them in one place, coverage flags are cleared, and you get a **dated proof report** for the file. This is the layer that keeps claims from getting denied for coverage that quietly lapsed.

This month's run · July 1

Patients checked	613
Active & eligible	590 96%
Needs a second look	16
No record / lock-in	7
Errors	0

A clean, complete run. 590 coverage flags cleared back into your system, with a dated proof report on file. The same check fires again August 1, with no action needed from you.

THE ROAD AHEAD

What you can look forward to

- **Insurance flags:** the list ticked up to 16 this week. The system surfaces each one nightly so your managers can clear coverage questions before they reach billing.
- **Dropped-referral calls:** the phone-first push is in your managers' hands. Lisa and Domonique are working the 296 call sheets warmest-first, and we will report the first results next week.
- **Renewals watch:** 20 authorizations expire in the next 30 days. The system is tracking each one so renewals go in before any coverage lapses.
- **August verification:** the top-of-month insurance run fires on its own again August 1, with the full proof report and no action needed from you.

The bottom line

The July insurance checkpoint ran itself and confirmed active coverage on **590 of 613 patients, 96 percent**, clearing 590 flags back into your system. Active care is holding steady at **645 patients**, a new authorization cycle opened July 1 with **1,509 weeks of care authorized**, and the dormant sweep came back **clean** across 682 charts. The past-client email reactivation stands complete at **1,743 emails**, the phone-first push on 296 dropped referrals is with your managers, and the insurance flag list, now 16, is on the board to work.

Census, dashboard, and roster figures reflect a live records refresh on July 5, 2026, pulled directly from your system, not estimates. The dormant sweep ran July 5, 2026 across 682 active charts. Authorization figures (including weeks of care authorized, used and remaining) reflect the authorization report refresh on July 4, 2026, and the new authorization cycle that opened July 1. Reactivation email totals reflect the completed campaign. The dropped-referral call campaign is in progress across 296 callable referrals. The top-of-month insurance verification ran July 1, 2026 across 613 active patients and is scheduled to run again August 1, 2026.