

## Insurance Verification Form

YOUR NAME: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_

INSURANCE NAME: \_\_\_\_\_ PHONE#: \_\_\_\_\_

INSURANCE ID: \_\_\_\_\_ INSURANCE EFFECTIVE DATE: \_\_\_\_\_

CLAIMS ADDRESS: \_\_\_\_\_

NAME OF INSURANCE REPRESENTATIVE: \_\_\_\_\_ CALL ID OR REPRESENTATIVE ID: \_\_\_\_\_

**Note:** We are in-network with Cigna. All other companies are out-of-network.

Do I have out of network benefits? Y or N

What is my deductible? \_\_\_\_\_ Has any of this been met? \_\_\_\_\_

Does my insurance offer end of year roll over? \_\_\_\_\_

What is my copay or percent that is covered once deductible is met? \_\_\_\_\_

What is the maximum amount of visits I can have? \_\_\_\_\_

What is the maximum dollar amount that can be covered? \_\_\_\_\_

What is the maximum dollar amount for out of pocket? \_\_\_\_\_

Do I have exam coverage? \_\_\_\_\_

(Ex. 99203 and/or 99213)

Are office visits covered at a certain %? \_\_\_\_\_ If so, what? \_\_\_\_\_

Are office visits subject to a co-pay? Y or N. If yes, what? \_\_\_\_\_

Do I have specialty testing coverage? \_\_\_\_\_

Will any supplements be covered? \_\_\_\_\_

ACUPUNCTURE COVERAGE: Y or N? Is there a website for acupuncture coverage? \_\_\_\_\_

(Ex. 97810 and/or 97813)

Is my acupuncture coverage diagnosis driven? \_\_\_\_\_

Does treatment need to be done by a MD or LAc? \_\_\_\_\_

What are my Acupuncture treatment limits?

# of visits \_\_\_\_\_ \$ maximum \_\_\_\_\_ #of days \_\_\_\_\_ etc. \_\_\_\_\_

Is notification, pre-authorization or a referral needed before treatment? Y or N

If yes: What do I need to do? \_\_\_\_\_

Do I have coverage for other modalities by an acupuncturist? Y or N

(Ex. 97124, 97140, 97802)

Modalities are covered at what % and are they covered under the same co-pay? \_\_\_\_\_

Are there limits or provisions on the policy that I have not inquired about?

\_\_\_\_\_

TODAY'S DATE: \_\_\_\_\_

YOUR NAME IF NOT PATIENT: \_\_\_\_\_

\*\*\*If you have secondary insurance please follow the same protocol with them.\*\*\*