

Healing Hands Bodywork

Elite Bodywork & Relaxation Therapy

How to determine your insurance benefits for Massage Therapy

KEEP THIS WORKSHEET FOR YOUR RECORDS

1. Call the 1-800 # for customer service on your insurance card. Select the option that will allow you to speak with a customer service provider, not an automated system.
2. Ask the customer service provider to quote your OUTPATIENT, OUT- OF- NETWORK massage therapy benefits. These are frequently termed rehab benefits and can include occupational therapy, speech therapy, and sometimes massage therapy.
3. ***Make sure the customer service provider understands you are seeing a non preferred, out-of-network provider who your doctor referred you to.***

Questions to ask the customer service representative

Name: _____

Date/time: _____

- Do I have Out-of-Network Benefits for Outpatient Massage Therapy? Yes ___ No ___
- Do I have a deductible? Yes ___ No ___
 - o If yes, how much is it? _____
 - o How much has already been met? _____
- Do I have a per calendar year plan or a per benefit year plan?
 - o If per benefit year, what are my dates of coverage? _____
- What percentage of coverage is my responsibility for seeing an OON provider? _____
- Does my policy require a written referral or prescription? Yes ___ No ___
 - o If yes, a written prescription from ANY prescribing provider? Yes ___ No ___
(eg: physician, nurse practitioner, podiatrist, chiropractor) Yes ___ No ___
 - o If no, does it have to come from a PCP (primary care provider)? Yes ___ No ___
- What is the name of the PCP on file? _____
- Is pre-authorization required for massage therapy services? Yes ___ No ___
 - o If yes, do I have one on file? Yes ___ No ___
 - o What is the expiration date? _____
- Is there dollar amount or visit limit per year? Yes ___ No ___
 - o If yes:
 - Dollar amount? _____
 - Visit limit _____

- Do I require a special form to submit a claim? Yes ___ No ___
 o If yes, how can I obtain it? _____
- What is the mailing address where I should send claims/ reimbursement forms?

- Can I submit my claim on-line? Yes ___ No ___
 o How? / Where ? _____

Navigating insurance can be difficult, we will do everything we can to help you with this process. Please understand, this worksheet was created to assist you in obtaining reimbursement for Massage Therapy services and is not a guarantee of reimbursement to you.

A deductible must be satisfied before the insurance company will pay for therapy treatment. Submit all bills to help each the deductible amount.

If you have an office visit co-pay the insurance company will subtract that amount from the percentage they will pay. This will affect the amount of reimbursement you will receive.

The reimbursement percentage will be based on your insurance company's established "reasonable and customary/ fair price" for the service codes rendered. This price will not necessarily match the charges billed; some may be less, some may be more.

If your policy requires a prescription or referral from a provider you must obtain one to send in with the claim. Each time you receive an updated referral you'll need to include it with the claim.

If your policy requires pre-authorization and the insurance company doesn't have one listed yet, you'll need to call the referral coordinator at your provider's office. Ask her to file a referral for your massage therapy treatment that is dated to cover your first massage therapy visit. Be aware that referrals and pre-authorizations have an expiration date and some set a visit limit. If you are approaching the expiration date or visit limit you'll need the referral coordinator to submit a request for more treatment(s).