

# Misty Mountain Acupuncture – Insurance Authorization for Acupuncture

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These are key questions to ask your insurance company to find out your policy's acupuncture benefits before coming to your first visit. Your insurance company will provide you with guidelines to your policy coverage. However, ultimately your coverage is determined on a claim-by-claim basis at the time the claim is submitted. If part or all of your claim is denied coverage, you will be financially responsible for services not covered.

Name of Your Insurance Co \_\_\_\_\_

Does your Insurance Policy cover Acupuncture? Yes No

Is a referral/prescription necessary prior to receiving acupuncture? Yes No

If referral required, who can refer/prescribe Acupuncture? PCP MD DC ND

What is the healthcare provider's name? \_\_\_\_\_ Phone \_\_\_\_\_

Does the plan require Pre-authorization? Yes No

Who is responsible for pre-authorization? Doctor or Acupuncturist

What is the address, phone #, or fax # the authorization and reports should be sent to?

\_\_\_\_\_

What is the annual Acupuncture benefit limit?

How many visits per year \_\_\_\_\_ What are the financial limits \$ \_\_\_\_\_

Do the benefit limits include treatment by a P.T. and/or a D.C.? Yes No

What is the policy's deductible? \$ \_\_\_\_\_ Has it been met? Yes No

If No, remaining amount \$ \_\_\_\_\_ Is there a co-pay? If yes, how much? \$ \_\_\_\_\_

Does the Acupuncturist have to be a Preferred Provider? Yes No

Is Valerie Wilson, LAc on the list (NPI# 158 802 7064/ Tax ID# 81-1924878) Yes No

If Valerie is not a Preferred Provider", are there out-of-network benefits? Yes No

If yes, what is the % of coverage \_\_\_\_\_%? Deductible \$ \_\_\_\_\_ Annual Benefit Limit \$ \_\_\_\_\_

Do the benefit limits for acupuncture overlap with treatments by physical therapist, chiropractor, and massage therapist? Yes No

Do the procedural codes 97140, 97124, 97026, or 97139 (that are used during acupuncture) take away from your physical or occupational therapy benefits? Yes No

Address of Claims Department \_\_\_\_\_

Date \_\_\_\_\_ Person you spoke with \_\_\_\_\_