

This is an optional step but highly recommended as your insurance company ultimately decides what your payment responsibility is

Insurance plan benefits vary widely, and benefit determinations for physical medicine procedures (Chiropractic, Physical Therapy, Occupational Therapy, etc) are even more complex. It is for this reason we recommend that you call your insurance company to inquire about your specific benefits. The following outline is a guide if you're unsure what to ask:

(1) I am inquiring about:

in-network OR out of network benefits

(2) Do I have Chiropractic Benefits?

Yes / No

If the answer is Yes, you will want to ask the following questions:

(3) Do I need a referral?

Yes / No

(If the answer is yes, you will need to contact your primary care physician prior to your Chiropractic office visit.)

(4) Is there a deductible that applies? Yes / No

If Yes, what is the amount? _____

Has any of my deductible already been met? _____

(5) Is there a copay or coinsurance that I am responsible for per treatment?

Yes / No

Copay amount: _____

Coinsurance amount: _____

(6) Are there any limitations?

Yes / No

Number of Visits: _____

Maximum Benefit Paid: _____

(7) If needed, are X-rays covered?

Yes / No

Reference Number for Your Call: _____