

Insurance Verification Worksheet

As much as we would like to, Capital Chiropractic cannot guarantee your insurance coverage*. Your insurance company can best answer questions about your policy and coverage. Please <u>call</u> them (calling is most effective), gather these details, and share your findings with us to help minimize surprises as you seek care here.

*Our office may attempt to confirm your benefits and eligibility, but we will not get final explanation of coverage for 4-6 weeks from when we submit your claim. As the customer of your insurance company, you will be able to gain access to these details faster than anyone.

Patient Name:	Da	te of Birth:		_Insurance Company	
Insurance ID: Group #					
Primary Card Holder Patient Y / N If no	who is?				
Relationship to Patient:	ient: Policy Holder Date of Birth:				
Date/Time Insurance Company Called:		Refe	rence #: _		
Deductible per Calendar Year:	_Amt Me	et:	emaining		
Policy year begins on January 1st? Y / N	N If no, v	when?			
Is Capital Chiropractic & Rehabilitation	on Cente	er (Tax ID:	4621729	49, NPI: 1285077557) "In Network"? Y /	
ls Dr. Chris LoRang (NPI: 1417390782	2) "In Net	twork"? Y	/ N		
Is Dr. Corrin Schreyer (NPI:170042433	30) "In N	etwork"?	Y / N		
ls Dr. Ryan Hartley (NPI: 1679174197)	"In Netv	vork"?Y/	Ν		
Does Deductible need to be met befo	re Coins	urance O	R Copay	apply? Y / N	
How is an office visit covered (for exa	ample, c	odes 9920	3 and 98	3941)?	
Coinsurance %: Copay:	Max	Benefit Am	ount \$	Max# of Visits/Year	
How is chiropractic care covered (for	example	e, code 98	941)?		
Coinsurance %: Copay:	Max	Benefit Am	ount \$	Max# of Visits/Year	
How is physical therapy covered (for	example	e, codes 9	7110, 97 [,]	112, 97530, 9716X)?	
Coinsurance %: Copay:	Max	Benefit Am	ount \$	Max# of Visits/Year	
For physical therapy, is pre-authoriza	tion req	uired?Y/	N		
For physical therapy, is referral from	PCP req	uired?Y/	Ν		
How is acupuncture covered (for exa	mple, co	de 97810)	? Does t	he doctor have to be a licensed MD? Y / N	
Coinsurance %: Copay:	Max	Benefit Am	ount \$	Max# of Visits/Year	
Telehealth Coverage - Does my insur	ance co	ver telehe	ealth for	the following codes:	
99201 through 99205 (E&M) Y / N	AND	99211 th	rough 9	9215 (Re-examination) Y / N	
97161 through 97163 (PT Eval) Y / N	AND	97164 (P	T –ReEv	/al) Y / N	
97110/97112/97530 (Physical Therapy	Services) Y / N			
Perhaps most importantly - what is p	atient re	sponsibili	ty for tel	ehealth visits? \$	