

How Do I Check My Insurance Benefits?

My physical therapist has informed me that they are not contracted with my insurance company. They will provide a superbill to me for insurance billing. It is up to me or my representative to determine insurance coverage, as well as any deductible, co-pays, and maximums. The following are suggested steps to verify my benefits in advance of my seeking reimbursement. I understand that quoted benefits do not guarantee coverage and/or payment and that, ultimately, reimbursement may be denied by my insurance company for a variety of reasons.

When calling the toll-free customer service number on the back of the insurance card, these are relevant questions to ask in advance of submitting for reimbursement:

1. Do I have out-of-network coverage for physical therapy services?
2. Do I need a referral from a physician for physical therapy services before receiving services? (If needed, CPT codes are located at the bottom of the page)
3. Do I need prior authorization with the insurance company before receiving PT services? (If needed, CPT codes are located at the bottom of the page)
4. Do I have limits (such as number of visits or financial maximums) on my plan for PT services?
5. (If applicable) Does my plan exclude TMJ-related services? (If needed, ICD-10 codes are located at the bottom of the page)
6. Do I have a deductible for PT services when seeing out-of-network providers?
7. How much can I expect to be reimbursed for each physical therapy visit?
8. What is the process for submitting a request for reimbursement?
9. How long should I expect to wait before receiving reimbursement?

Potential CPT codes: 97161, 97140, 97110, 97035, 97530, 97112

Potential TMJ-related ICD-10 codes: M79.11, R68.84