



This information provided will guide you through checking your nutrition counseling benefits to ensure that our time together is covered by your insurance plan, if possible.

Currently, we are contracted with **AETNA, CIGNA and TRICARE** and we are in the process of contracting with United Healthcare and BlueCross BlueShield.

If we do not accept your insurance at this time, we can provide you with Superbills for you to submit to your insurance company for possible out of network reimbursement. Payment is due at the time of service and a Superbill is provided on a monthly basis for you, the client, to submit to your insurance company.

For **IN NETWORK** benefits:

Record the representative's name and make sure you receive the **reference number** when checking benefits. This information will be necessary if you ever need to dispute or reject a claim.

Call the member services number on the back of your insurance ID card and ask the following questions:

1. Does my plan cover medical nutrition therapy?
2. Does my plan cover any of the following codes: 97802, 97803, 99205, 99215, 99417?
  - a. If YES: How many sessions are covered with which code?
3. Does my plan only cover visits that are "medically necessary" or do they also cover preventive services (code to provide: Z71.3)
4. Do I have a deductible to meet first?
5. If yes, how much is the deductible?
6. How much of the deductible has been met so far?
7. Do I have a copay for outpatient nutrition counseling?
8. Do I need a physician referral?