**HEALTH INSURANCE VERIFICATION FORM**

The Ren Clinic bills insurance as a courtesy to our patients, however, patients are ultimately responsible for charges resulting from office visits and treatments received. It is therefore important that you understand your own coverage and benefits. It is not uncommon for insurance companies to provide different information to patients and their providers. Therefore, it is very important to make note of the service representative you speak with when gathering information about your plan in order to reference back to it in case of discrepancy. This form will help you understand your insurance coverage. If your insurance changes, please make sure to update information with our office.

**PLEASE CALL MEMBER SERVICES FOR THIS INFORMATION:**

The phone number for your insurance company’s member services or customer service department should be listed on your insurance card.

Representative: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Reference number for call: \_\_\_\_\_\_\_

When did my coverage begin? \_\_\_\_\_\_\_\_ Benefits based on calendar year? Y/N

What is my deductible and has any of it been met? $\_\_\_\_\_\_\_\_\_/year $\_\_\_\_\_\_\_\_\_\_\_\_ met

**Are visits with the following provider types subject to deductible?**

Acupuncturist: Y / N

Naturopathic Doctor office visits (codes such as 99213/99214): Y / N

Physical Therapist: Y / N

**Are extended visit codes (CPT code 99354) subject to deductible? Y / N**

**What is my coverage for the following services?:**

Naturopathic Office Visit: \_\_\_\_\_\_\_\_\_% coinsurance **or** $\_\_\_\_\_\_\_\_\_\_Co-pay Yearly max? \_\_\_\_\_\_

Acupuncture: \_\_\_\_\_\_\_\_\_% coinsurance **or** $\_\_\_\_\_\_\_\_\_\_Co-pay Yearly max? \_\_\_\_\_\_

Physical Therapy: \_\_\_\_\_\_\_\_\_% coinsurance **or** $\_\_\_\_\_\_\_\_\_\_Co-pay Yearly max? \_\_\_\_\_\_

Labs: \_\_\_\_\_\_\_\_\_% coinsurance **or** $\_\_\_\_\_\_\_\_\_\_Co-pay Yearly max? \_\_\_\_\_\_

Imaging: \_\_\_\_\_\_\_\_\_% coinsurance **or** $\_\_\_\_\_\_\_\_\_\_Co-pay Yearly max? \_\_\_\_\_\_

**If I receive acupuncture in the same visit that I have an office visit with my doctor, am I required to pay two copays? Y / N**

**Is a naturopathic doctor considered a primary care provider on my plan?** Y / N

**Do you have a list of preferred labs or imaging centers for my plan and if so, what are they?**

**Do I need a referral or pre-authorization for any of the above services?**

**Can my naturopathic doctor perform my annual physical and/or my gynecologic exams?**

Feel more informed & empowered? Great! Confused? Understandable! If you have any questions feel free to ask us!