

A Helpful Guide for checking your insurance benefits

Questions to ask your insurance company about your chiropractic coverage:

- Do I need a prescription or referral from my Primary Care Physician?
- What is the copay or coinsurance?
- Do I need to meet a deductible?
- Are my chiropractic benefits for **MANIPULATION** only?
 - IF YES:
 - Are modalities covered under a different benefit? (usually Physical/Occupational therapy benefit)
 - What is the copay/coinsurance for that benefit?
 - Do I need to meet a deductible for that benefit?
 - IF NO:
 - So modalities are included in my chiropractic copay/coinsurance?

Questions to ask your insurance company about **MASSAGE coverage:**

- Do I have insurance coverage for massage therapy
 - When performed by an LMT?
 - When performed under the scope of the chiropractors license?
- Do I need a prescription or referral?
- Do I need to see an in-network massage therapist? AND/OR do I have any out-of-network benefits for massage therapy?
- Is massage subject to my deductible?
- How many total visits do I have for massage? Is the number of visits shared with any other benefit like acupuncture or physical therapy?

VOCABULARY:

- **Copay**- A fixed dollar amount the insured pays at the time services are rendered
- **Coinsurance**- the insured pays a percentage of all services. (ex: insurance pays 80% of all services- you pay the remaining 20% of services billed)
- **Deductible**- a specified amount of money that the insured must pay before an insurance company will pay a claim
- **Manipulation** (spinal)- the adjustments done by the Chiropractor
- **Modalities**- the soft tissue work, electrical stimulation work etc... done (in most cases) by the chiropractic assistant.