

Working with Insurance:

Unfortunately, insurance companies often do not reimburse for acupuncture or for the functional medicine consultations necessary to diagnose and treat your condition. The system of medicine that I practice is often outside the scope of your policy, especially if you only have major medical coverage.

Please use the worksheet on p. 2 to help **you determine what your policy covers**. Then I will know how to describe the services you receive on the superbill for each treatment. I do not vary my rates from insurer to insurer; that would not be legal or ethical. Nor do I alter the care you receive based on your coverage. You and I can, however, use the knowledge of your particular coverage to decide how best to spend our time together.

What the acupuncture codes cover:

The new acupuncture codes operate on an assumption: it will take me only 15 minutes to greet you, evaluate your progress, choose, and locate points, insert the needles, then return and remove them, plan for your next treatment and make your next appointment. (This does not count the time you're resting with needles and I am out of the treatment room). Each carrier decides how much they reimburse for one treatment (the first set of needles), and how much they reimburse for each set of additional points/treatments/ ("reinsertions") that we need to do.

Additional services/codes possibly covered by your carrier:

A new patient always receives an initial Evaluation (which is billed using an Evaluation and Management -- E &M -- code). During subsequent treatments, your insurer **may reimburse** for additional reevaluation (beyond what they expect I can do within the 15 minute acupuncture treatment), **if** there is a definite measurable change in your condition that requires a significant change in your treatment plan, or if you fail to respond to the previous treatment plan. Examples: your shoulder pain didn't change or got worse, or you now have tingling, or your shoulder is better but you have a cold you can't shake, or this week your cramps are severe. (I put "may reimburse" in bold, because reimbursement for Evaluation and Management codes varies from insurer to insurer.) We will need to know what and how your carrier reimburses for E & M.

Services/codes that may or may not be covered:

Some insurers reimburse for telephone calls, consultation, and for additional practices like massage or manual therapies (including cupping) and heat treatments (hot/cold packs, moxa).

Important services that probably won't be covered (but should):

Most insurers probably won't reimburse for medical nutrition therapy, preventive medicine counseling, and health and behavior assessment (instruction about lifestyle modifications that promote the healing process or help change habits that impede the healing of an existing condition). These are, however, a key part of most people's recovery.

Insurance reimbursement worksheet:

These are the codes to ask your insurer about:

What is the reimbursement for an out of network provider for the following procedure codes:
(I am not a network or preferred provider.)

_____ **97810 Acupuncture** 1st set of insertions _____ **97813 Electro-Acupuncture** 1st set

_____ **97811** each additional insertion _____ **97814** additional electro-acupuncture

Do they pay the full allowed amount _____ or do they pay a % of the allowed amount?

If a %, what % of the allowed? _____

_____ **97140** Manual therapy _____ **97110** Therapeutic exercises _____ **97124** Massage

Evaluation & Management, Initial

E &M, Established

_____ **99203-25** detailed

_____ **99213-25** expanded

_____ **99204-25** comprehensive

_____ **99214-25** detailed

_____ **99205-25** highly complex

_____ **99215-25** comprehensive

_____ **97802/97803** Medical Nutrition Therapy _____ **99402** Preventive Medicine Counseling

Also find out the following:

Do you need pre-authorization? _____

What deductible must be met before acupuncture is reimbursed? _____

What is the co-pay for each acupuncture treatment? _____

Is there a maximum amount reimbursed for acupuncture per year? _____

Is there a limit on frequency to use Evaluation & Management codes for changing conditions? _____

visits for the same diagnosis code per year? _____ # acupuncture treatments per year _____

Does your insurer exclude any diagnosis codes or require that acupuncture be used only for certain diagnosis codes? (for example, for pain only) _____

You may be reimbursed more easily and efficiently if you **send in your superbills on a weekly basis**, rather than sending in a large number all at once. So mail them as soon as you receive them.