

Insurance F.A.Q.

It can be confusing to deal with insurance, so we have compiled a document to help make the process easier!

At New Health Medical Center, we encourage our patients to engage with their own insurance companies to better understand their own personal coverage, which can be different amongst different plans, and be better engaged with the office visits, which leads to better health outcomes.

Here are some common terms one may wish to familiarize themselves with before speaking to insurance:

- **Co-Pay or Co-Payment:** A fixed amount for a covered service, paid by a patient to the provider of service before receiving the service. It may be defined in an insurance policy and paid by an insured person each time a medical service is accessed.
- **Co-Insurance:** Copayment is fixed, while co-insurance is the percentage the patient pays after the insurance has paid their percentage; however, the deductible has to be met first.
- **Deductible:** A minimum amount that is paid out of pocket by the patient BEFORE insurance coverage will start
- **CPT codes:** Current Procedural Terminology (CPT) code is a medical code that identifies the services rendered
- **ICD-10 codes:** a medical classification list that contains codes for diseases, signs and symptoms, abnormal findings, complaints, social circumstances, and external causes of injury or diseases
- **NPI:** National Provider Identifier (NPI) is a unique 10-digit identification number issued to health care providers in the United States

Here are a few common questions you can ask your insurance to figure out your coverage with our providers:

1. Do I have a Co-pay? If so, how much? Is it different for Office visits and Acupuncture visits?
2. Do I have a co-insurance? If so, what percentage is my responsibility?
3. Do I have a deductible? If so, how much total and how much of it has been satisfied to date?
Do the office visits with the doctors and acupuncture treatments apply to it?
4. Is the provider covered on my plan? If not, do I have out-of-network benefits?
5. Is this provider covered under Office visits CPT codes: 99203~99205, 99213~99215
Are there any caps to how many visits per year?
6. Is this provider covered under Acupuncture CPT codes: 97810~97814
Are there any criteria or parameters required? ie. certain ICD10 codes required
Are there any caps to how many visits per year?
7. Is pre-authorization needed in for me to have treatments with this doctor? Or do I need a referral?

We hope this has been a helpful guide in navigating the insurance world. If you are unsatisfied with your policy, be sure to be your own advocate and provide constructive feedbacks to your insurance company. Afterall, the consumers create the demand that companies attempt to meet.