

Insurance Reimbursement Guide

My office does not file insurance claims or pursue payment from insurance companies. My relationship is with the client, not with his/her insurer, and my office policy is that payments are made directly to me at the time of consultation. I encourage each client to consider all of the options available to help pay for his/her health care, including health savings accounts, flexible spending accounts and insurance coverage to obtain reimbursement for fees paid for homeopathic care.

I am a member of Healthways Whole Health Networks Affinity Program. I can offer a discount to all clients whose insurance company contracts with Whole Health Networks. Please inquire to see if your insurance company qualifies for the discount offered through Whole Health Networks.

STEP 1: Contact insurance company to determine coverage

Call the insurance company and ask if they cover homeopathic consultation or alternative medicine consults (some have this coverage) and to what extent they reimburse expenditures for each of these categories. If they cover this, request a form so that a claim can be filed for this. Some will send you a form, others will have you print it from an Internet site.

STEP 2: Document the consult you want reimbursed

If they cover homeopathy/alternative medicine consults, photocopy the Consult Invoice form provided to you showing payment for our work together. The insurance company will need: practitioner name, date, client name, amount paid, CPT code -all of these are on the Consult notes document.

STEP 3: Document the diagnosis code from the primary care physician's office

Contact your primary care physician's office and ask the front desk for the diagnosis code related to your chief complaint. This would have been assigned during either a special visit to consult about this complaint, or possibly during a routine check up and should be part of the medical record there. Explain to the receptionist that you need this for insurance documentation -they are usually helpful about these things. These can only be assigned by a physician, not by me. Write the name/phone/office details of the physician, and the diagnosis code on the statement form from me.

STEP 4: Submit and follow up

Fill out the form from the insurance company to request reimbursement, and attach the form from me (whichever one you are using) and send it in.

After a week, call to make sure it has been received. Call to check on it a few weeks later. If it is denied, resubmit it. Be persistent. Some companies are great about paying up front easily, others need some pestering to get anything done. Persist diplomatically until the payment to which you are entitled has been paid to you.