

How to Determine Your Insurance Benefits for Physical Therapy

FYZICAL Therapy & Balance Centers - Colonia, NJ
732-587-5656

1. Call the toll free # for customer service on your insurance card. Select the option that will allow you to speak with a customer service provider, not an automated system.
2. Ask the customer service provider to quote your physical therapy benefits in general. These are frequently termed rehabilitation benefits and can include occupational therapy, speech therapy, and sometimes massage therapy.
3. Make sure the customer service provider understands you are seeing a non-preferred provider/out-of-network provider.

What YOU need to know:

- Do you have a deductible? Yes/No If yes, how much is it? ____ How much has already been met? ____
- What percentage of reimbursement do you have? (60%, 80%, 90%, are all common) _____
- Does the rate of reimbursement change because you're seeing a non-preferred provider? Yes/No
- Does your policy require a written prescription from your primary care physician? Yes/No
 - If yes, will a written prescription from any MD/physician, or a specialist your PCP (primary care physician) referred you to be accepted? Yes/No
 - Does your policy require pre-authorization or a referral on file for outpatient physical therapy services? Yes/No • If yes, do they have one on file? Yes/No
 - Is there a \$ or visit limit per year? Yes/No If Yes, What is it? _____
 - Do you require a special form to be filled out to submit a claim? Yes/No How do I obtain it?
 - What is the mailing address you should submit claims/reimbursement forms to?
 - Is there an online website where you can submit the claim? Yes/No What is the address?

4. What this information means:

- A deductible must be satisfied before the insurance company will pay for therapy treatment. We will submit all bills on your behalf to help reach the deductible amount.
- After paying your deductible, the insurance company will typically pay for therapy treatment. If you have an office visit co-pay the insurance company will subtract that amount from their payment. Therefore, your co-pay amount is still your payment responsibility for therapy treatment.
- If your policy requires a prescription or referral from your PCP you must obtain one before your physical therapy evaluation. This is usually not difficult to obtain if your PCP sent you to a specialist for help with your condition.
- If your policy requires pre-authorization or a referral on file, call us a day or two before your initial appointment. As a courtesy, our office will obtain this for you at no charge. Be aware that obtaining referrals and pre-authorizations are your responsibility. They have an expiration date and some set a visit limit. If you are approaching the expiration date or visit limit, you'll need to ask our staff to submit a request for more treatment. Additional authorization must be obtained before receiving additional care, otherwise you will be responsible for payment in full for all visits without pre-authorization.

This worksheet was created to help you understand your insurance coverage and to assist you in accessing quality Physical Therapy services.

Please contact us if you have any further questions or would like help understanding your benefits.

KEEP THIS WORKSHEET FOR YOUR RECORDS