

## Check Your Acupuncture Coverage

Dr. Jocelyn Joy, DAOM, L.Ac

The great news is many more insurance carriers are offering Acupuncture benefits! However, the type of coverage for acupuncture is varied, and can be confusing. To be an informed consumer, make sure you do your homework first.

**Unfortunately, I and my staff are unable to check insurance coverage for you.**

**Call the member number on the back of your insurance card and ask the following questions.**

Ins Company/ Member ID	Date/Time	Member Service Phone#	Spoke with
<b>Do I have Acupuncture Coverage?</b>	YES NO		
<b>Is a Licensed Acupuncturist able to treat me?</b>	YES NO	<b>Do I need a provider in Network?</b>	YES NO
<b>Is Jocelyn Joy, L.Ac. in Network?</b>	YES NO	<b>Where is your list of Providers?</b>	
<b>Are there any limitations on what can be treated?</b>	YES NO	Medical Necessity	Limited to Pain/Nausea
<b>Do I need a referral to obtain coverage?</b>	YES NO	From Primary Care Dr.?	Referral #
<b>Do I have an annual visit maximum?</b>	YES NO	How many _____	How much met so far _____
<b>Do I need a Pre-Authorization to get the best rates?</b>	YES NO	Pre-Authorization #	
<b>Do I have an annual cost limit?</b>	YES NO		
<b>Are these visits combined with Chiropractic and Massage/Other?</b>	YES NO		
<b>Do I have a Co-Insurance or Copay?</b>	YES NO	How Much _____	
<b>Do I have a Deductable?</b>	YES NO	How much _____	How much met _____
<b>Is the Deductable for a Calendar Year?</b>	YES NO	If not, when start/end?	
<b>What is the percentage of coverage before/after and deductible met?</b>	Before _____	After _____	
<b>What is the percentage of coverage IN/OUT of network?</b>	In Network _____	Out of Network _____	
<b>Is this benefit administered by another company?</b>	YES NO	Name	Phone/ website
<b>Am I responsible for the difference between what the provider charges and what insurance covers?</b>	YES NO		

**NOTES:**

**\*Medical Necessity:** Most insurance requires medical necessity for use of Acupuncture Benefits. This means you are only able to use your benefits if it is deemed medically necessary; an approved complaint (often pain or nausea/vomiting) and limited to visits that demonstrate progress. Visits denied if there is no progress or if progress has plateaued. (Even if you have 30 visits a year, or a referral for a whole year).

**\* Bring this filled out sheet with you to your 1<sup>st</sup> Appointment!**

Coverage is not automatically an assurance of payment for services.

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