



CHECKING OUT-OF-NETWORK BENEFITS

This page will guide you through checking your nutrition counseling benefits to find out if our time together is covered by out-of-network coverage in your insurance plan. Payment will be required upfront regardless of coverage.

If you are contracted with another insurance company, we are more than happy to provide you with a superbill to submit to your insurance company for reimbursement for our sessions. The superbill does not guarantee reimbursement



CALL THE MEMBER SERVICES NUMBER ON THE BACK OF YOUR CARD AND ASK:

"Does my plan cover out-of-network outpatient nutrition counseling sessions?" Provide the representative with the following CPT codes: 97802 (initial session) and 97803 (follow-up sessions). If no, you will receive no reimbursement for nutrition services.

IF YES:

- Does the plan cover preventive counseling with diagnosis code: Z71.3?
- Using the codes from step 1, ask: "Does the plan cover medical nutrition therapy for conditions that need nutrition counseling, such as eating disorders, IBS, high cholesterol, etc.?"
- How many sessions are allowed per plan or calendar year?
- Do I have a co-pay for outpatient telehealth nutrition counseling visits?
- Do I need a physician referral?



MAKE A NOTE:

Record the representative's name, the date and time you called, and a reference number when checking your benefits. This information will be necessary if you ever need to dispute a rejected claim.

SUBMIT SUPERBILL

3-5 days after your appointment you will be provided a superbill. Submit this receipt to your insurance company for possible reimbursement.

