

## DOES MY INSURANCE COVER MY CARE?

### **Important:**

- Dr. Laura Mehofer is an out-of-network cash-based provider and does not accept insurance including Medicare and Medicaid. This does not mean that your insurance will not cover your care (follow this document's instructions below to see what your coverage may entail). What it does mean is that you are responsible for the full payment of your appointment and for submitting/filling out the required paperwork from your insurance. As stated in this document below, upon request Dr. Laura Mehofer can provide you with a superbill which is required for insurance submission.
- Dr. Laura Mehofer is licensed only in the state of Minnesota. What this means is that if you receive treatment from her (telehealth or in-person) and you are physically located in the state of Minnesota, your services will be billed as physical therapy. If you are outside of the state of Minnesota at the time of your appointment, your services will be billed as wellness coaching.

### **How Do I Find Out What My Plan Covers?**

Call your insurance company BEFORE your first appointment with Dr. Laura Mehofer to find out what your plan covers. Call back 2 to 3 times to ensure you receive correct information. Some customer service representatives are more knowledgeable and accurate than others. This is advice directly from an insurance agency!

### **How Do I Contact My Insurance Company?**

Visit your insurance company's website or check the back of your insurance card for a Membership Services or Coverage Questions phone number.

### **What Information Do I Provide to My Insurance Company?**

- Have your insurance card on hand. You will be asked to provide your member ID, group number, name, date of birth and address.
- Ask the representative to confirm they have pulled up your policy to ensure they give you the correct information.
- Some of the following questions involve diagnosis codes and treatment codes, which may help you determine possible coverage from your insurance. To see the

most common codes Dr. Laura Mehofer uses, please refer to the “Diagnosis/Treatment Codes” document located on the [Helpful Documents](#) page of Dr. Laura Mehofer’s website.

Tell the representative: “I would like to receive physical therapy treatment from an out-of-network provider. Does my policy cover out-of-network care for physical therapy services?”

If the answer is “NO,” don’t get off the phone!

Just because a provider is in-network does not mean your care is 100% covered. Companies that have contracts with insurance often inflate their cost because insurance will only pay so much. The rest of the cost falls on you to pay the difference.

Ask the following questions to understand what your cost would be with an in-network provider so you can compare with my rates:

- Would appointments with an in-network physical therapist be 100% covered? (If the answer is “yes,” don’t hang up yet! Follow up with these questions...)
- Is every Diagnosis Code 100% covered or are there only certain codes 100% covered?
- What Diagnosis codes are covered 100% and which codes aren’t covered?
- Are there certain Diagnosis codes that can’t be used together?
- Is there any cost to me if a diagnosis code or treatment code is covered?
- Is there any cost to me if a diagnosis code or treatment code is NOT covered?  
What is the cost to me?

Seeing an in-network provider can often cost you MORE than what it would cost to see me because of partial coverage.

If the answer is “YES,” ask:

- What does my plan cover?
- Are there certain Diagnosis Codes that are or are not covered? (Refer to my Diagnosis/Treatment Codes document). I use M62.838 - Muscle Spasm and/or M62.81- Muscle Weakness most often.
- Are there certain Treatment Codes that are or are not covered? For the first evaluation I most commonly use 97163 - Physical Therapy Evaluation, 97140 - Manual Therapy, and 97110 - Therapeutic Exercise (please refer to my Diagnosis/Treatment Codes document as there are other codes that can be used throughout a course of care).



- Do I have an out-of-network deductible for physical therapy services? If so, how much is it and how much have I already paid towards it this year? Am I responsible for 100% of this deductible or do you cover a percentage?
- Once I meet my out-of-network deductible, are these physical therapy services 100% covered or do I have an additional out-of-pocket max? What is my out-of-pocket max and how much have I put towards it this year?
- Do I have a cap on the amount of physical therapy visits I am allowed in one year? If so, how many have I already used? Are there any stipulations to these visits?

\*Some insurance plans do not have out-of-network deductibles or out-of-pocket max, but they do have a limit on the number of visits you can have in a calendar year.

If you've been patient enough to ask the questions provided and called back 2 to 3 times to verify the information, you should have a clear understanding of:

- If and how much your insurance company will reimburse for services with an out-of-network physical therapist.
- Out-of-pocket expenses if you receive treatment with an in-network physical therapist.
- If moving forward with Dr. Laura Mehofer's services is the best option for you from a financial perspective.