



How to Determine Your Insurance Benefits for Physical Therapy

KEEP THIS WORKSHEET FOR YOUR RECORDS

1. Call the toll free # for customer service on your insurance card. If possible, select the options that will allow you to speak with a customer service provider, not an automated system. (sometimes saying “representative” or pressing the number zero gets you there faster)
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. Then, ask specifically what your OUT OF NETWORK physical therapy benefits are.
4. Make sure the customer service provider understands you are seeing a non-preferred provider/out of network provider who your doctor referred you to (

What YOU need to know:

Do you have a deductible? _____ If so, how much is it? _____

How much is already met? _____

What percent of reimbursement do you have? _____

Does the rate of reimbursement change because you're seeing a non-preferred provider? _____

** Does your policy require a written prescription from your primary care physician? _____

** Will a prescription from any MD, or a specialist your PCP referred you to, be accepted? _____

Does your policy require pre-authorization or a referral on file for outpatient physical therapy services? _____

If yes, do they have one on file? _____

Is there a \$ or visit limit per year? _____

Do you require a special form to be filled out to submit a claim? _____

What is the mailing address you should submit claims/reimbursement forms to?