## **Insurance Benefit Investigation: Nutrition Counseling**

Updated 10/21/2021

The purpose of this script is to give you guidance in navigating your insurance benefits to ensure that our time together is covered by your insurance plan and you are aware of any costs associated with our service. Please note Doherty Nutrition is currently in network with the following health insurance plans: Aetna, Ambetter with Superior, Anthem/Blue Cross Blue Shield, Cigna, Humana, Medicaid, Medicare Part B, Molina, Oscar, and UnitedHealth Care. If you are contracted with another insurance company, Doherty Nutrition can provide a superbill (itemized list of services) for you to submit to your insurance company. The superbill does not guarantee reimbursement from the insurance company.

## Call the member services number on the back of your insurance card and ask:

- 1. Does my plan cover nutrition counseling (Procedure codes: 97802, 97803, 97804)? Are there nutrition benefits under the preventative care portion of my plan (for non-Aetna patients provide ICD-10 code Z71.3)?
- 2. Are visits limited to specific diagnosis codes? Are there any restricted diagnosis codes?
- 3. Is there a limit to the number of visits (or units) per day/year?
- Do I have a deductible to meet before insurance pays?
  If so, how much is the deductible?
  How much of the deductible has been met to date?
- 5. Do I have a specialist copay or coinsurance for nutrition counseling?
- 6. Is a doctor's referral required?Is a referral authorization from my insurance required?
- 7. If interested in telehealth (virtual) visits, ask your insurance if your benefits for telehealth are the same/different than in-office visits.
- 8. If your health insurance plan is not listed above, you can ask if Doherty Nutrition LLC (National Provider Identification #: 1326502832) is a covered group under my plan? If not a covered group, what are my out-of-network nutrition counseling benefits?
- 9. Record the representative's name you speak with and a call reference # when checking your benefits. This information will be necessary if you ever need to dispute a rejected claim.

\*\*\* It is important to note that all benefit investigations are estimates of coverage, not a guarantee of coverage. Coverage is subject to plan benefits and account standing at the time the services are rendered \*\*\*

