

Questions to ask member services for out of network benefits:

1. Do I have out of network benefits?
 - a. If the answer is no, then ask if there is any way you could get reimbursed for services performed outside of the network (sometimes there might be exceptions).
 - b. If the answer is yes to the question about out of network benefits, proceed with the following questions.
2. I would like get information about my coverage for out of network chiropractic services done in the office. Would you be able to help?
3. Is there a deductible to meet? If so, what is the deductible?
4. After I meet my deductible, is there a co-insurance?
5. Does my in-network deductible also apply to my out of network deductible?
6. Do I have an out of network out of pocket(OOP)?
7. Is this combined with my in-network OOP?
8. What is the reasonable and customary rate for my chiropractic services?
 - a. They will probably need the following:
 - i. TAX ID, NPI, CPT codes and ICD 10 codes.
 - b. The specific information can be found on your services rendered receipt.
 - c. Members services might also have this information from previous claims.
9. Is there a visit limit?
10. Are my visit limits based on medical necessity?
11. Are there any other limitations to chiropractic services?
12. How do I file a claim?
13. Is there a time limit for filing claims?
14. How soon can I expect a payment or explanation of benefits?