

## Questions to ask your insurance company about your chiropractic coverage:

Do I need a prescription or referral from my Primary Care Physician?

What is the copay or coinsurance?

Do I need to meet a deductible?

Are my chiropractic benefits for **MANIPULATION** only?

IF YES:

Are modalities covered under a different benefit? (usually Physical/Occupational therapy benefit)

What is the copay/coinsurance for that benefit?

Do I need to meet a deductible for that benefit?

IF NO:

So modalities are included in my chiropractic copay/coinsurance?

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## Questions to ask your insurance company about **MASSAGE** coverage:

Do I have insurance coverage for massage therapy

When performed by an LMT?

When performed under the scope of the chiropractors license?

Do I need a prescription or referral?

Do I need to see an in-network massage therapist? AND/OR do I have any out-of-network benefits for massage therapy?

Is massage subject to my deductible?

How many total visits do I have for massage? Is the number of visits shared with any other benefit like acupuncture or physical therapy?

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## VOCABULARY:

**Copay**- A fixed dollar amount the insured pays at the time services are rendered

**Coinsurance**- the insured pays a percentage of all services. (ex: insurance pays 80% of all services- you pay the remaining 20% of services billed)

**Deductible**- a specified amount of money that the insured must pay before an insurance company will pay a claim

**Manipulation** (spinal)- the adjustments done by the Chiropractor

**Modalities**- the soft tissue work, electrical stimulation work etc... done (in most cases) by the chiropractic assistant.