

Step by Step Guide to Complete an Out of Network Benefits Check

Steps to inquire about nutrition consultation reimbursement for out of network services:

- 1. Call the number on the back of your card. Ask to speak to the benefits department.
- 2. Do I have any out of network benefits?
- 3. Does my plan cover out of network nutrition counseling/medical nutrition therapy for the following CPT codes: 97802, 97803
 - a. If yes, how many appointments or hours are allowed per plan year?
- 4. Does my out of network plan cover diagnosis code Z71.3 with CPT codes 97802, 97803?
 - a. Please note, if you have any of the following diagnoses, please ask about coverage for the associated diagnostic code
 - i. Anorexia F50.0
 - ii. Bulimia F50.2
 - iii. Binge Eating Disorder F50.81
 - iv. **OSFED F50.89**
- 5. Do I need a referral prior to to my out of network appointment?
- 6. If the representative says your plan is covered with preventative only, ask if the diagnosis code Z71.3 is considered preventative with the CPT code 97802 and 97803
- 7. Do I have a deductible to meet first before my out of network coverage will be reimbursed?
 - a. If yes, how much is the deductible? *The deductible is the amount of money you have to spend out of pocket before insurance begins covering 100% of services
- 8. Take note of the following information and keep for your records
 - a. Name of representative
 - b. Phone call reference number
 - c. Day/Time of call

Questions? Email us at hello@liberatedplate.co

