

It's important to call Member Services to confirm your actual nutrition counseling coverage, as benefits vary widely and may include limitations or fees. During your call, please gather the following information to determine whether your policy will cover these services. *The italicized lines are the questions to be asked to the representative.*

1. *Are CPT codes 97802/97803 covered by my policy?* (Please provide these codes first to specify nutrition counseling.)
2. *If not, are there any nutrition counseling CPT codes that are covered such as 99404?*
3. *Please check if the following diagnosis codes are covered in my policy.* Nutrition counseling coverage often depends on the specific diagnosis. These are general codes to verify during your call, select what is appropriate to you. If you have a diagnosed condition you'd like to address in counseling, ask the representative whether it is covered under your plan. We can review the exact diagnosis details together once we know your condition is eligible for coverage.

Z71.3 – Preventive code	E28.2 – PCOS
K58.0 – IBS	R73.03 – Prediabetes or E11.9 - Diabetes
I10 – Hypertension	E78.0 – High cholesterol

4. *Is there a deductible that needs to be met before payments go directly to the provider?* If there is, the representative can tell you what that is and how close you are to meeting it. *
5. *Is there a copayment or coinsurance required with my policy?*
6. *If so, does anything change after meeting the yearly deductible?*
7. *Is a referral from my doctor required?*
8. *How many sessions or units are covered?*
9. *Is this per year or per lifetime?*
10. *If by year, does the plan go by plan year (if so, confirm dates) or calendar year?*
11. *Is telehealth covered by my plan?*
12. **What is the reference number for the call today? (Keep this in case you need to dispute information provided during the call.)**

*A deductible is the amount of money required to be paid out of pocket by the policy holder to the insurance company per year (in addition to the monthly premium) before the insurance company provides payment for services rendered.

