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Checking Insurance Benefits

This page will guide you through checking your nutrition counseling benefits to find out if our time together is covered by your insurance plan.

Please know that I do not call to verify your coverage for nutrition counseling. Your plan contract is an agreement between you and your insurance company, and I have no part in that. Any claims that are denied will be your responsibility to cover. Please get as much detail as possible from your insurer so you are aware of the potential for out-of-pocket costs.

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

- “Does my plan cover outpatient nutrition counseling sessions?” Provide the representative with the following CPT codes: 97802 (initial session) and 97803 (follow-up sessions).
- If no, you will be required to pay out-of-pocket for nutrition sessions.
- If yes,
 - Is Carolina Guizar a provider in my network?
 - Do I have a deductible to meet first?
 - i. If yes, how much is my deductible?
 - ii. How much of the deductible have I met?
 - Does the plan cover preventive services under the following codes?
 - i. Code Z719 for Aetna
 - ii. Code Z713 for Cigna, Oscar, and Emblem?
 - Does the plan cover medical nutrition therapy for conditions that need nutrition counseling? These conditions can include: eating disorders, high cholesterol, high blood pressure, diabetes, irritable bowel syndrome, PCOS, etc.
 - Do I have a co-pay for outpatient nutrition counseling **in an office**?
 - Do I have a co-pay for outpatient **telehealth** nutrition counseling visits?
 - How many sessions are allowed per plan or calendar year?
 - Until what date do I have telehealth coverage for virtual sessions during the COVID-19 crisis?
 - i. Does my plan cover telehealth beyond COVID-19?
 - Do I need a physician referral?
- Record the representative’s name and a reference number when checking your benefits. This information will be necessary if you ever need to dispute a rejected claim.