

Practice Name

Doctor Name, M.D.

Address, City, State Zip

Phone • Fax

Thank you for your interest in our clinic. We look forward to meeting you!

We have enclosed this insurance verification form for your convenience. We recommend that you contact your insurance company by using the number on your insurance card and ask the questions listed below and fill in the information on this form. This form was generated to help you better understand your insurance policy and coverage.

Insurance Company: _____ Phone: _____

Spoke To: _____ Date: _____ Time: _____

Patient Name: _____ Policy Holder Name: _____

Date patient became effective on policy: _____ Does Pre-Existing Condition Apply? **YES** **NO**

If YES, what is the pre-existing time period? _____

Specialist Office Visit will be covered by (please circle):

Co-Pay

Deductible and Co-Insurance

Co-Pay \$ _____ Co-Insurance: In-Network % _____ Co-Insurance: Out-of-Network % _____

Individual Deductible \$ _____ Individual Deductible Amount Met \$ _____

If applicable, Family Deductible \$ _____ Family Deductible Amount Met \$ _____

Out-of-Pocket Individual Amount \$ _____ Out-of-Pocket Amount Met \$ _____

If applicable, Family Out-of-Pocket \$ _____ Family Out-of-Pocket Amount Met \$ _____

How will my insurance policy cover a hearing test (CPT 92557), if the test is done on the same day as my office visit? This test is non-routine and will be billed with a medical diagnosis, and is not for the fitting of a hearing aid.

If diagnostic/machine tests are performed at a later date, and no office visit will be billed on the same day as the testing, how will benefits be considered? _____

If diagnostic/machine tests are performed and an office visit will be billed on the same day, how will benefits be considered? _____

Notes:

The items listed on the attached sheet are only an example of the tests (machine tests/diagnostic tests) that may be performed in our office. All of the tests below will not be performed on every patient, but the list has been provided to help you determine how your insurance will consider benefits for services that will be performed in our office.