

## Guide: Check Insurance Coverage

How to check your insurance benefits for nutrition counseling

Juno Wellness is currently in network with the following insurance plans:

- Anthem Blue Cross
- Carefirst BCBS
- Cigna
- Medicare
- United Healthcare
- Tricare

If you are contracted with another insurance company, Juno Wellness will provide a superbill for you to submit to your insurance company. The superbill does not guarantee reimbursement from the insurance company.

The goal of the questions below is to guide you to determine if nutrition consultations are covered with your insurance plan and to provide awareness of any costs or copays associated with the services.

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

1. Does my plan cover nutrition consultations (Procedure codes: 97802, 97803, and 97804)?
2. Is nutrition counseling under the 'preventive care' side of my benefits or is it under my 'medical care' side of my benefits?
3. Are visits limited to specific diagnosis codes (if so, which ones)? Are there any restricted diagnosis codes (if so, which ones)?
4. Is there a limit to the number of visits (or units) per day/per year?
5. Do I have a deductible to meet before insurance pays? If so, how much is the deductible? How much of the deductible has been met to date?
6. Do I have a specialist copay or coinsurance for nutrition counseling?
7. Is a doctor's referral required? Is a referral authorization from my insurance required?
8. If interested in telehealth (virtual) visits, ask your insurance if your benefits for telehealth are the same/different from in-office visits.
9. If your health insurance plan is not listed above, you can ask if Samantha Smith (Registered Dietitian at Juno Wellness - National Provider Identification #: 1902569973) is a covered group under my plan? If not a covered group, what are my out-of-network nutrition counseling benefits?
10. Record the representative's name you speak with and a call reference # when checking your benefits. This information will be necessary if you ever need to dispute a rejected claim.

\*\*\* It is important to note that all benefit investigations are estimates of coverage, not a guarantee of coverage. Coverage is subject to plan benefits and account standing at the time the services are rendered \*\*\*