

Insurance Verification

Emerald Vine Massage

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1. Does your insurance policy cover Massage Therapy performed by an LMP? Yes No
(LMP = Licensed Massage Practitioner Some insurances only cover massage by a PT, DC, or MD)
2. Does treatment have to be referred? Yes No
3. Does treatment have to be prescribed? Yes No
4. Who can refer/prescribe Massage Therapy? PCP MD DC ND ARNP
(PCP = Primary Care Provider, MD = Medical Doctor, DC = Chiropractor, ND = Naturopath, ARNP = Nurse Practitioner)
5. Who is the Primary Care Provider (PCP)? _____ Phone: _____
6. Does the plan require pre-authorization? Yes No
7. Who is responsible for pre-authorization? The Doctor The Massage Therapist
8. What is the address, phone number, and fax number authorization and reports should be sent to?
Address: _____
Phone: _____ Fax: _____
9. What is the annual massage benefit limit? \$ Amount: _____ # of Treatments: _____
10. Do the benefit limits include treatment by a PT and/or DC? Yes No
(It is possible that your insurance plan lumps massage visits together with PT and/or DC visits. It is also possible that your PT or DC may be using some massage in your treatment, billing your insurance agency for massage and, thus, maxing out your allowed massage treatments)
11. What is the deductible? _____
Has the deductible been met? Yes No
If "No," what is the remaining amount? _____
12. Is there a co-pay? Yes No
If "Yes," what is the amount/percentage? _____
13. Does the LMP have to be a preferred provider? Yes No
Is Shaina M. Akidau, LMP on the list? Yes No
14. Are there out-of-network benefits? Yes No
If "Yes," what is the % is covered? _____
Does the deductible remain the same? Yes No
If "No," amount: _____
Is the annual massage benefit limit the same? Yes No
15. Where should claims be sent? Phone: _____ Fax: _____
Address: _____

Date of Verification Call: _____ Time: _____ Person You Spoke With: _____

Patient Signature: _____