

Insurance Inquiry Form

To expedite payment for your visit, please acquire all of the following information about your medical benefit from your insurance carrier.

Company/Plan Name: _____

Insurance ID#: _____ Group# _____

Because every medical plan is different, you will need to find out the details of your individual plan. To do this, start by calling the number on the back of your insurance card and ask the following questions:

Today's Date: _____ Date of Eligibility: _____

Is the doctor I want to see contracted as in-network? _____

If not, do I have out-of-network benefits? (get details): _____

What is my annual deductible?: _____

How much of my deductible have I met so far? _____

Do I have to meet my deductible before insurance pays for an office visit? _____

What is my office visit co-pay/co-insurance percentage? _____

What is my co-pay/co-insurance for lab services: _____

Do I have to meet my deductible before my plan pays for lab and/or imaging services? _____

Insurance Representative Name: _____ ID # _____

This information does not guarantee coverage or payment by your insurance company, but is a good indication of your how your coverage works and your out of pocket responsibility.