



# Insurance Verification Script

Please use this script as a guide to verify your insurance benefits and determine what services are covered by your insurance plan. When contacting customer service, make sure to note the date, time, representative's name, and reference number of your call.

Piece of Nutrition currently accepts **Blue Cross Blue Shield (BCBS) PPO** – including Blue Choice, Anthem, and some other affiliate BCBS plans-- and **United Health Care PPO** – and affiliate United-Optum Plans.

\* If you have a plan other than BCBS or UHC, we are able to provide a superbill for you to submit to the insurance company for out-of-network reimbursement. The superbill does not guarantee reimbursement.

Please have the following information on hand as it may be needed:

## **Piece of Nutrition**

Group NPI #: 1699350207

## **Libby Moser, MS, RDN, LDN**

Provider NPI #: 1760049415

## **Jaclyn Jozefiak, MPH, RDN, LDN**

Provider NPI #: 1497412126

PIECE OF NUTRITION LLC



[WWW.PIECEOFNUTRITION.COM](http://WWW.PIECEOFNUTRITION.COM)



[HELLO@PIECEOFNUTRITION.COM](mailto:HELLO@PIECEOFNUTRITION.COM)



312-566-7079



# Insurance Verification Script

- Is my plan a PPO or HMO?
  - Please note, HMO plans are not currently accepted by Piece of Nutrition
  - If it is an HMO plan, what is my out-of-network reimbursement rate and can it be applied to nutrition services?
- Does my plan cover outpatient nutrition counseling codes (CPT codes: 97802, 97803, S9470)
  - Does my plan cover Telehealth services for the following codes: 97802, 97803, S9470?
  - Is there an end date for Telehealth coverage in my plan?
  - Does my plan require prior authorization?
  - Do I have a limit on my number of sessions?
  - Am I required to meet my deductible prior to reimbursement for these services? If so, how much is my deductible?
- Does my plan cover the ICD code Z71.3 dietary counseling and surveillance (preventative MNT services)?
  - If yes, how many sessions are allowed?
  - Is there a copay or coinsurance associated with the coverage? If so, what is the copay/coinsurance?
- If preventative services are not covered, please ask about other diagnoses codes that are covered within your plan (for example- FO 50.9 eating disorder OR Z72.4 inappropriate diet and eating habits).
  - Please note the diagnoses codes that are provided by the representative.
    - These codes will need to be obtained and provided by a medical or mental health provider.
  - If yes, how many sessions are allowed?
  - Is there a copay or coinsurance associated with the coverage? If so, what is the copay/coinsurance?

By using this form I certify that if insurance denies counseling for nutrition services I am 100% responsible for the payment. In addition, I will provide the following information from my insurance agent representative to help navigate/dispute denied claims to Piece of Nutrition.

PIECE OF NUTRITION LLC



[WWW.PIECEOFNUTRITION.COM](http://WWW.PIECEOFNUTRITION.COM)



[HELLO@PIECEOFNUTRITION.COM](mailto:HELLO@PIECEOFNUTRITION.COM)



312-566-7079