Insurance Benefit Script Please complete prior to starting services. Please call the customer service number on the back of your insurance card and ask the following questions to determine if nutrition counseling services are covered by your plan.

It is the client's responsibility to contact their insurance company prior to starting services to verify benefits & eligibility and to inquire about potential out-of-pocket cost.

Alo Nutrition does not verify insurance benefits & eligibility. You may elect to skip this form and not check your benefits & eligibility. If services are not covered by your insurance, you will be responsible for the full cost of the session per the rates in the billing agreement.

I hereby agree to the document above.

Name of your insurance representative. Date

Is Alo Nutrition IN NETWORK or OUT OF NETWORK?

In Network
Out of Network

If your insurance plan is an out-of-state Blue Cross Blue Shield policy (meaning not a Missouri based plan ie: Boeing in St Louis, MO has a BCBS of Illinois plan) and you are told that our dietitians are out of network please inform the customer service representative that:

"The provider is in-network with their local, Missouri Blue Cross Blue Shield plan."

Does my plan cover nutrition counseling appointments with a registered dietitian?

Yes

No

Do I need a physician referral?

Yes

No

Do I need a prior authorization?

Yes

No

Do I have medical benefits for nutrition counseling and/or nutrition education? (for an eating disorder use code F50.89)

Yes

No

How many visits are covered?

Do I have preventative benefits?

Yes

No



Is 'Z71.3 dietary counseling and surveillance' covered? Yes No How many visits are covered Do I have benefits for diabetes counseling? Ask this question even if you do not have diabetes. Yes No Are there any restricted diagnoses? Please list: Check off all billing (CPT) codes covered: 97802 (initial appointment) 97803 (follow-up appointment) 99401-99404 Do I have a deductible to meet before insurance pays? Yes No If so, how much is the deductible? Do I have a copay? Yes No If so, how much is the copay Are telehealth visits covered? Yes Nο Do I have a limit on the number of telehealth visits? Yes How many visits? No Reference number for the call. Any other information of note?

