



Insurance Policy

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Denise Bowden and Courtney Reiman are In-Network Providers with Cigna PPO. This could mean that all or a portion of your visits will be covered by your insurance. With any insurance plan, it is important to note that coverage is not guaranteed and benefits do vary between plans.

How it works in the clinic:

- Patient is responsible for full payment at the time of service. To submit claims, you may either (1) give us your insurance information and we will courtesy bill or (2) choose to receive itemized receipts (Superbills) for each visit and submit to insurance on your own.
- If patient chooses the courtesy billing option, patient may pay copayment **after** copayment amount has been established. This process can take anywhere from two to four weeks. In most cases, payment is sent to our clinic and we will notify you of what portion, if any, your insurance is reimbursing.
- We bill per procedure code performed and to the highest level of specificity. For those paying out-of-pocket, you will find that the cash price, the amount you pay for your visits, is different from the amount billed to insurance. This is a result of the per procedure billing. We are not reimbursed for the full amount billed. Billing in this way serves the patient by setting a better co-pay.
- If The Root & The Branch receives reimbursement from a patient's insurance carrier, a credit will be applied to the account and we will adjust the rate for future visits accordingly. For example, if insurance reimburses \$45 of a \$95 return visit, we will set the patient's co-pay to \$50 and credit the patient \$50 for the next treatment.

Wanting to check your benefits?

- Acupuncture is an out-of-network benefit and must be specifically listed on your insurance policy. We are happy to contact your insurance for you. However, our experience has taught us that the policy holder can most easily verify their benefits. If you would like to check your benefits, here are some helpful questions to ask your insurance provider:
 1. Is acupuncture a covered benefit on my policy?
 2. Are there any restrictions to acupuncture coverage? (i.e., acupuncture must be performed by a Medical Doctor or it is only covered for nausea with chemotherapy.)
 3. What is my out-of-network deductible? (If acupuncture is covered without restrictions.)
 4. How much of my out-of-network deductible has been met?
 5. How many visits will be covered per year?