

OUT-OF-NETWORK Reimbursement Questionnaire

Mobility Medicine is a Fee for Service Clinic, which means that we do not participate with Insurance Companies. We will provide you with a receipt that you can submit to your insurance company for reimbursement, if you have Out-of-Network coverage. Please use this form when contacting your Insurance Company to find out how much of our visits will be reimbursed to you.

Make sure you have your Insurance Card and call the number on the back.

Information they may ask for:

Codes that Mobility Medicine Bills 99214 (office visit), 99204 (new office visit), 98925-98929 (Osteopathic Manipulative Medicine).

Billing National Provider Identification (NPI): 1629442876

Office Address: 4050 W. Maple Rd. #108 Bloomfield Hills, MI 48301

Questions you should ask:

"I would like to know what coverage I have for an office visit with an Out-of-Network Physician including the visit and osteopathic manipulative treatment (OMT)(Codes 98925-98929)."

Today's Date/Time:
I spoke with:
Do I have a deductible?
If yes, how much is my deductible?
How much of my deductible has been met so far?
When does my deductible renew?
What is my maximum out-of-pocket expense?
Has anything been applied to my out-of-pocket?
How much is covered on the OMT procedure codes 98925-98929?
Is there a limit to the number of OMT procedures covered in a certain time
period?
When I submit my own claims, is there a form I need to provide other than a super
bill?
What is the mailing address or fax number I would use to submit my
claims?