REIMBURSEMENT FROM INSURANCE

PATIENT FINANCIAL & REFERRAL INFORMATION

WHAT YOU NEED FROM US

For all reimbursements:
- Itemized Receipt - Amount you paid and what it was for.
- Medical Encounter - Our documentation of your visit/procedure.

For reimbursement of services that insurance typically deem as "elective" or "cosmetic":
- Letter of medical necessity - Doctor's reasoning of why your diagnosis should be covered by insurance.
- Letter of medically appropriate - Doctor's reasoning of why procedure should be recognized as therapy.
- Reimbursement Code Cheat Sheat - Helps you fill out forms correctly.

WHAT YOU NEED FROM YOU

- Your full name and policyholder (if different) information.
- Your insurance policy member ID number.
- The date of service and provider name.
- Login information to your insurance online portal or the phone number of your insurance.
- "Medical Reimbursement Form" or "claim form" - Different insurances call it different names. Depending on your provider's policy, you might need to submit this and items above electronically through their online portal or by mail. See step 1 (on back) for more info.

WHAT YOU NEED TO KNOW BEFORE STARTING

Strategy: We have done this enough to know for most what works and what doesn't.
- Your insurance should work for you. That's what insurance is designed to do. It is a paid service where they receive your insurance premium.
- Insurance companies have a harder time saying no to patients (their policy holders) than they do doctor's offices, thats why this process has the best chance at you receiving medical coverage.

Reimbursement takes different forms. Know your insurance plan: When contacting your insurance they should be able to provide you with more information about your specific plan. You may also benefit from educating yourself on each of the following:
- Deductible: The amount you must pay out-of-pocket before your insurance starts covering costs.
- Coinsurance: The percentage of covered charges you are responsible for after meeting the deductible.
- Out-of-Network Reimbursement Rate: The percentage of allowable charges if out-of-network.
- Be aware that your insurance might not cover all services or might only offer partial reimbursement.

Other info:
- Your insurance might deny your claim despite your best efforts. If your insurance denies coverage, consider appealing the decision by contacting your insurance's appeals department.
- Proceess will likely take several weeks. You will typically receive a letter or notification detailing the outcome of your claim, including the amount they will reimburse.

PHONE
Call or text us
at 385.273.3376

SMART Skin
DERMATOLOGY

LOCATION
3200 W Clubhouse Dr. #100
Lehi, UT 84048

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STEP 1 - FILE YOUR CLAIM

- Gather all items before begining
- Call your insurance provider or go to their online portal. Figure out the specific steps to seeking reimbursement your insurance requires. Portals may be found on our *Insurance & Self-Pay Options* web page
- (if cosmetic) Fill out the form utilizing the "Reimbursement Equivalent Codes" handout. If you are stuck, take the time to read this cheat sheet fully to understand the fields you might be required to fill out.
- When submitting your claim be sure to upload all supporting documentation. Some insurances may only allow for you to submit certain foms. If this is the case, be sure to call the insurance and ask how to submit additional information. The more you send, the better your chances at reimbursement.

STEP 2 - APPEAL (IF NECESSARY)

If your reimbursement is denied:

- Contact your insurance provider and request an appeal. There may be certain steps you must do for particular insurances.
- Do as much over the phone as possible. These items are medically necessary and sometimes its too easy for an insurance to say no when its all electronic. During the various steps try and make the insurance representatives work for you. They can sometimes help get through red tape. Make your insurance work for you.

STEP 3 - PROVIDE US FEEDBACK TO HELP OTHERS

At your next appointment be sure to provide us with status updates and any feedback you recieved during the process. We are always looking for tips and tricks to pass on to to make this process more successful for our patients. This process can be frustrating for those who get denied. With time and more feedback we can continue to improve this for all patients.

OTHER RESOURCES

We work hard to publish only best patient education and comprehensive resources. We want to be your trusted source of all skin information. You will find additional educational information by scanning the following QR codes.

Our Monthly Newsletter

Patient Resources

Insurance & Self-Pay Options

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