

## SuNu Wellness Insurance Questionnaire

At SuNu, we want our patients to be educated about the care they receive, including how it gets processed through their insurance plans. In order to help you better understand the financial investment of your treatments, we ask that you call your health insurance prior to your first visit to find out what your individual plan does and does not cover. At your second Chiropractic visit, we will meet with you to inform you of the approximate insurance coverage that aligns with your doctor's suggested treatment plan. We also will compare insurance rates vs. our cash rates and our discounted package pricing because in some cases it may be more cost effective for you to pay out-of-pocket or with HSA, rather than utilize your insurance benefits. In addition, we want to make sure that you understand approximately how much each visit will cost so that you are aware of any charges you will incur or bills that you may receive in the mail. Ultimately, we want you to focus on improving your health and not on worrying about insurance and billing. HSA and FSA funds are also accepted forms of payment to cover many services at SuNu, including bills from chiropractic services and co-payments.

### **If you would like to consider using insurance, please follow the instructions below:**

Call the member service number on the back of your insurance card and ask for chiropractic benefits and eligibility. Give them our name and clinic address:

Minnetonka location:  
SuNu Wellness Center  
12455 Ridgedale Dr Suite 203,  
Minnetonka, MN 55305

Linden Hills location:  
SuNu Wellness Center  
2822 W 43rd st, Suite 100  
Minneapolis, MN 55410.

### **Ask the representative the following 7 questions:**

1.) Is Chiropractic care covered under my plan?

2.) Is SuNu Wellness in-network with my plan? If not, what are my out-of-network benefits, if any?

*Please note that while we are not In Network with Blue Cross Blue Shield - if you are inquiring about out-of-network benefits: BCBS patients will need to ask for the specific treating doctor to get accurate chiropractic benefits.*

3.) Do I have a copay, deductible or co-insurance for my office visits? If so, what are the amounts/limits?

4.) Do I have a Chiropractic dollar or visit limit? What is that subject to? Medical necessity or acute pain?  
Have I used any visits so far this plan year?

5.) Does my plan cover chronic pain, maintenance, wellness or preventative care?

6.) When does my plan renew? Is it a calendar year plan?

7.) Are exams, re-exams, therapies or extremity adjustments covered?

## **Understanding Acute vs. Maintenance Care and Visit Limits**

The intention behind having visit limits is to establish a guideline for determining when care is in the acute phase vs. the maintenance/wellness phase. Oftentimes, insurance companies don't thoroughly explain this in their policies, but all care that is submitted by us, must be considered "medically necessary" in order to be covered. Medically necessary care means that it falls under the acute or rehabilitative phase. Once care reaches the maintenance phase, it is no longer considered medically necessary and will not be covered by insurance.

The Office of the Inspector General defines maintenance care as being when there is no more forward progress, even if treatments are still helpful. Elective care is care you receive in an effort to avoid injury or general pain, rather than care to treat a specific injury. These are "Wellness/Non-covered services." A simple way to determine whether care is in the acute phase or not, is to use a pain scale. Once a patient is no longer seeing progressive improvements, they are no longer considered to be in the acute phase. For example, if a patient starts at a 7/10 on the pain scale and as they receive care, their number continues to decrease, they are considered to be in the acute phase. As soon as their pain scale begins to plateau, or teeter between a small range, care then moves into the maintenance phase. As this stage of care is not covered by insurance, this is when we must switch from insurance to self-pay.

Following these contractual guidelines allows us to remain in good standing with the major insurers and avoid being penalized or taken out of network. We do this to preserve the ability to provide care utilizing insurance for as many patients as possible. This does mean that although many plans reset at the start of a new year, we may not be able to begin billing your insurance unless there is a new complaint or injury.

As always, we strive to provide the best possible care to our clients, despite insurance restrictions. Our doctors are more than happy to discuss any questions you might have, and we have a Billing and Insurance Specialist on staff to support you as well. If you are experiencing hardship at this time, we offer a sliding fee scale option with proof of income (tax return), please inquire for the application to see if your household would be eligible.

SuNu Minnetonka Insurance Coordinator: Kalli

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Phone: (952) 314 - 7035

SuNu Linden Hills Insurance Coordinator: Hannah

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