diastrong

CLAIMING YOUR DIASTRONG APPOINTMENT THROUGH INSURANCE

If you're interested in claiming your appointment with your insurance company, review the following guideline for more information.

1 REVIEW YOUR INSURANCE POLICY

Before booking an appointment with a DiaStrong provider, review your personal insurance plan to confirm that the services you're looking to claim are included in your insurance or benefits package. Please also review what percentage of coverage you'll receive from this service (90%, 80%, 70%...). Be aware of your annual dollar maximum and the frequency that this type of service can be claimed.

2 BEFORE & AFTER YOUR APPOINTMENT

After booking and joining your appointment, it's important to ensure that you receive and keep a copy of your receipt from the appointment. DiaStrong will email you your receipt upon completion of your appointment with a provider. While some insurance companies may differ in receipt details, the standard information needed on the receipt is the following:

✔ Your name
✔ The date of your appointment
✔ The location of your appointment (for DiaStrong, this would be "virtual appointment through DiaStrong")
✔ The type of service / appointment
✔ The duration of the appointment
✔ The name of the provider / credentials / contact details
✔ The total cost

3 FILING A CLAIM

Once you receive your receipt from your appointment, the next step is to file it with your health insurance company. Your health insurance provider will most likely need you to fill out a health claim form, which can usually be found on their website. On this form you should include:

✔ The name of the plan holder
✔ Your current address and phone number
✔ The type of expense being claimed
✔ The total amount of the claim
✔ The plan holder's original signature

To this form, you should attach the original receipt from the appointment you purchased. Most claims will be looked at shortly upon receipt.

Some insurance companies are now accepting online claims; however, always keep the original receipts just in case they audit your claim. If you cannot produce the information stated above, you will then have to pay back the amount you were reimbursed by the insurance plan.

4

AWAIT APPROVAL FROM YOUR INSURANCE COMPANY

How you are reimbursed for your appointment is dependent on your insurance company. In most cases, you should receive an Explanation of Benefits either by email or postal services. This is a statement showing what your health insurance provider paid towards your claim, and if there was a deductible.

If the claim was not reimbursed, the Explanation of Benefits will explain why. Sometimes it may be because the receipt was missing information. Other times it may be because your plan doesn't cover that particular service.

If you're still not sure how it works, call your health insurance provider today to help you file your claim.