



## Melrose Center Insurance Benefit Verification

### (Intensive Residential and Residential Treatment)

This form is to help you determine whether your insurance policy has benefits for behavioral health eating disorder treatment for Melrose Center. Understanding your benefits for this coverage is an important part of the process. It is your right and responsibility as patient to know and understand your benefits.

#### Instructions

1. Call the customer service number located on your insurance card and speak to a customer service representative.
2. Tell the representative that you would like to check policy benefits for eating disorder treatment.
3. Ask the following questions to get the necessary information.

#### Disclaimer

- Melrose Center is not responsible for incorrect information the insurance company may provide to you.
- Completion of this form does not mean a guarantee of payment for services that may be rendered to you. Should the insurance company deny any services, you will be responsible for 100% of the charges.
- Be prepared to have the following information ready to share with your insurance company

Date of birth	
Insurance name	
ID number	
Group number	

Questions for representative	Answer from representative
Is Melrose Center "in network" for outpatient behavioral health eating disorder treatment?	
My care will take place in a <b>residential hospital setting</b> . Does my policy cover Intensive Residential and Residential treatment for behavioral health eating disorder care?	

<p>My services will be billed with a hospital revenue <b>code 190</b> for <b>Intensive Residential</b> and a revenue <b>code of 101</b> for <b>Residential</b>.</p> <p>(NOTE: for UBH, UHC, Medica, and UMR insurances everything is billed using 101 code).</p> <p>Is this covered?</p> <p>Will a <b>prior authorization</b> be needed? If so, who do we contact for this?</p>	
Does my policy limit the number of visits with a dietitian, medical provider, and/or psychotherapist?	
What is the co-insurance for my policy?	
What is the name of the representative and the reference number?	

Optional questions	Answers
1. What is the deductible per calendar year?	
2. How much have I met toward my deductible?	
3. What is the maximum out-of-pocket per calendar year?	
4. How much have I met toward my maximum out-of-pocket?	
5. Is the deductible applied to the maximum out-of-pocket?	