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HOW DO I CHECK MY BENEFIT LIMITS FOR SPINAL MANIPULATIONS, PHYSICAL THERAPY, ACUPUNCTURE OR LABS

Call the customer service number on the back of your insurance card.

Customer Service Representative Name: _____

Reference #: _____

Is my plan: **CALENDAR YEAR** or **PLAN YEAR**

What date does my benefits and accumulators reset? _____

SPINAL MANIPULATION BENEFITS

Is my chiropractic/spinal manipulation benefit combined with other services? **Y N**

If so, which services?: **ACUPUNCTURE NATUROPATHY PHYSICAL THERAPY MASSAGE THERAPY**

What is my visit or dollar maximum? _____

How many visits or dollars have I used to date? _____

What date of service are my claims processed through? _____

If a chiropractor bills CPT code 97140 "Manual Therapy," which benefit does it fall to: **CHIRO** or **PT**

****Note: If 97140 falls to PT, then please ask the questions in the section below about Physical Therapy. This means no matter who bills CPT 97140 (Chiropractor, Acupuncturist, MD, PT, etc), that a PT visit is used each time this code is billed and an additional patient portion will be due. ****

PHYSICAL THERAPY BENEFITS

Is my physical therapy benefit combined with other services? **Y N**

If so, which services?: **OCCUPATIONAL THERAPY SPEECH SPINAL MANIPULATION MASSAGE THERAPY**

What is my visit or dollar maximum? _____

How many visits or dollars have I used to date? _____

What date of service are my claims processed through? _____

ACUPUNCTURE BENEFITS

Is my Acupuncture benefit combined with other services? **Y N**

If so, which services?: **CHIROPRACTIC NATUROPATHY PHYSICAL THERAPY MASSAGE THERAPY**

What is my visit or dollar maximum? _____

How many visits or dollars have I used to date? _____

What date of service are my claims processed through? _____

If an Acupuncturist bills CPT code 97140 "Manual Therapy," which benefit does it fall to: **ACU or PT**

****Note: If 97140 falls to PT, then please ask the questions in the section for Physical Therapy. This means no matter who bills CPT 97140 (Chiropractor, Acupuncturist, MD, PT, etc), that a PT visit is used each time this code is billed and an additional patient portion will be due. ****

LAB & X-RAYS:

What are my in-network lab & x-ray benefits?: _____

What are my out-of-network lab & x-ray benefits?: _____

Is there an upfront benefit insurance pays first before there is any patient portion due?: **Y or N**

If yes, what is the total upfront benefit?: _____

How much of the upfront benefit have I used to date?: _____

After you have called your insurance company to gather this information, if you still have questions or need help interpreting this information, please contact our billing team at 503-789-6045.

Please bring this form to your next visit if you would like your Provider to know where you are at in your benefit limits and have this information help shape your treatment plan.