

Insurance Benefits Information

Please follow the instructions below to find out what your physical therapy benefits and coverage are.

This is not a guarantee of reimbursement.*

Once you create a Jane account I am able to provide you with superbills for you to submit to your insurance for reimbursement.

You are typically able to schedule for up to 12 visits or receive treatment for 45 days (whichever comes first) without a prescription. If you are still in need of therapy after that I can send a plan of care and prescription directly to your physician so your care continues uninterrupted. Make sure you provide this information in your intake paperwork.

Determining Your Benefits

1. Call customer service on your insurance card and select the option for speaking with a customer service provider (a real human not an automated system)
2. Ask the representative to provide your "out-of-network," out-patient physical therapy benefits.
3. Get the following information and write it down:

- Your "out-of-network" deductible: \$_____
- How much of the deductible has already been met? \$_____
- What percentage of reimbursement do you have for out-of-network physical therapy? (50%, 60%, 80%, 90%?) \$_____
- Does your policy require a prescription or pre-authorization from your primary care doctor for physical therapy services? Yes / No
- Get a confirmation number for your recorded call to reference in the future should there be a discrepancy with your reimbursement after submission:
