

Insurance Information

Not all services or providers at the Penny George Institute for Health and Healing may be covered by your insurance plan. Some services, including integrative nutrition and acupuncture for Medicare enrollees, require an order for us to bill insurance. Be aware that having a doctor's order for your services does NOT mean the services will be covered by your insurance plan. Even if you have coverage for a particular service, your benefit may be limited by why you are coming (your diagnosis).

Providers bill for the "total time" when seeing a patient. This means that any time spent reviewing the chart, lab results or pre-charting for the visit as well as any time charting after the visit will be billed additionally to the face-to-face portion of your appointment. This may show up as a separate charge on your bill. While this may not be a noticeable change for a majority of patients, we recognize that this will be a distinct change for patients enrolled with high deductible plans who may have not yet met their deductible for the current year.

If services are not covered, you can decide to prompt-pay. This means that you can pay directly for the services in full during the check-in process, and the amount we charge you is a discounted rate available to anyone who can prompt pay on the day of service. The prompt pay option is only available on the date of service. If payment is submitted to insurance and the claim is denied or applied to a yearly deductible, you will be responsible for the full fee for service amount.

We strongly encourage you to verify your benefits and network limitations prior to your appointment.

Recommended approach if you wish to bill insurance:

1. Call your insurance plan to determine your benefits. Ask if the specific service you are requesting is a covered benefit. Refer to the billing codes listed on page 2.
2. Clarify under what medical conditions (diagnosis) this benefit applies.
3. Confirm if you have any visit limits.
4. Clarify if prior authorization is required by your insurance plan. If prior authorization is required, contact the Penny George Institute for Health and Healing at 612-863-3333 and we will submit the prior authorization request on your behalf to your insurance plan.
5. Determine whether an order for services is required by your insurance plan. Please note that the Penny George Institute for Health and Healing requires an order for Integrative Nutrition and acupuncture for Medicare enrollees in order to bill charges to your insurance plan. An order is not required for Acupuncture in general, but is recommended. The order should be provided from a physician, physician's assistant, nurse practitioner or chiropractor with ALL of the following information:
 - a. Service to be received.
 - b. Referring provider's printed name and signature.
 - c. Diagnosis to be treated. This is the diagnosis that will be on the bill submitted to insurance.

If your order does not have all the information listed above, the Penny George Institute for Health and Healing may not be able to legally submit the bill to insurance. If your provider is part of the Allina Health system, we recommend the order be issued through your electronic medical record.

6. Find out if Allina Health, the Penny George Institute for Health and Healing and the provider you are coming to see is in network for your insurance plan.
7. Clarify what portion of the bill will be your responsibility, including co-pays, co-insurance and your deductible.

For Worker Compensation or Auto/Accident Claims:

- Contact your case manager to determine coverage. Bring claim number and accident information including date, time, place of injury, and nature of accident when you come for your first appointment.
- For Worker's Compensation claims, you will be asked to provide your employer name, adjuster/case manager name and contact information, Workers' Compensation name and claims mailing address.

The Penny George Institute for Health and Healing is able to submit billing as follows:

Service	Billing Codes	Coverage
Integrative & Functional Medicine Consultations	<i>Billed similar to a routine office visit:</i> 99205 or 99215 (In-Office) 98003 or 98007 (Virtual)	<ul style="list-style-type: none">• Covered by insurance in <u>most</u> cases.• Contact your insurance plan to verify coverage.• Additional billable time added in units of code 99417 for visits longer than 40 minutes.
Acupuncture	97810, 97811, 97813 and 97814 Additionally, providers may bill an E&M Code with initial visits and when re-evaluation is needed using: 99203, 99204, 99205, 99212, 99213 or 99214	<ul style="list-style-type: none">• Coverage varies by insurance plan.• Contact your insurance plan to verify coverage.• Medicare only covers acupuncture for the diagnosis of chronic low back pain. Some Advantage plans may cover the service for other diagnoses.• <i>Medicare requires an order for billing purposes.</i> Must list a diagnoses of either M54.51 (Vertebrogenic low back pain) or M54.59 (Other low back pain) as well as the following statement: <i>I am recommending a course of acupuncture for this patient's Chronic Low Back Pain.</i>
Nutrition Consultation	97802 and 97803	<ul style="list-style-type: none">• Coverage varies by insurance plan.• Contact your insurance plan to verify• Medicare and Medicare Replacement plans ONLY cover nutrition visits related to Diabetes or End-Stage Renal Disease (ESRD)• Order is <i>required</i> for Medicare and Medicaid
Preventing Diabetes Group Class Series	97804	<ul style="list-style-type: none">• Coverage varies by insurance plan.• Contact your insurance plan to verify• Class series is NOT covered by Medicare or Medicare Replacement Plans
Integrative Psychotherapy	90832, 90834 and 90837	<ul style="list-style-type: none">• Coverage varies by insurance plan.• Contact your insurance plan to verify

We strongly encourage you to contact your insurance plan to verify insurance coverage and benefits. We are not able to know how much you will need to pay out of pocket. It is your responsibility to determine this.

If you have questions regarding insurance or billing, please call the Penny George Institute for Health and Healing at 612-863-3333.

PENNY GEORGE INSTITUTE FOR HEALTH AND HEALING

Metro Locations: *Abbott Northwestern, Bandana Square, Champlin, Courage Kenny-Golden Valley, Eagan, East Lake Street, Highland Park, United Pain Clinic, United Women's Health, WestHealth-Plymouth, Women's Health Consultants-Downtown and Woodbury*

Metro AHCI Locations: *Abbott Northwestern, Mercy/Unity and United Hospital*

Prompt pay discounted price list for services

SERVICE	First visit		Follow-up visit	
	Prompt-pay discounted fee	Fee-for-service cost	Prompt-pay discounted fee	Fee-for-service cost
Acupuncture	\$160	\$428-\$625	\$105	\$238-\$420
Pediatric Acupuncture (Ages 0-12)	\$90	\$428-\$625	\$50	\$238-\$420
Traditional Chinese Medicine (TCM) Consultations	\$160	N/A	\$105	N/A
Integrative & Functional Medicine Consultations Physicians	\$350	\$550-\$1480	\$300	\$396-\$1250
Integrative & Functional Medicine Consultations Nurse Practitioners/PA's	\$300	\$460-\$1250	\$300	\$304-\$950
Integrative Nutrition Consultations	\$160	\$435	\$105	\$372
Preventing Diabetes Group (3 class series)	Prompt Pay: \$90/series		\$176.40/per class billed to insurance	

The prompt pay amount is a discount from the regular fee for these services and is only available on the date of service. If payment is submitted to insurance and the claim is denied or applied to a yearly deductible, the patient will be responsible for the full fee for service amount.

Prompt pay discounted price list for services

SERVICE	First visit		Follow-up visit	
	Prompt-pay discounted fee	Fee-for-service cost	Prompt-pay discounted fee	Fee-for-service cost
Acupuncture	\$125	\$428-\$625	\$90	\$238-\$420
Pediatric Acupuncture (Ages 0-12)	\$90	\$428-\$625	\$50	\$238-\$420
Integrative & Functional Medicine Consultations with Physicians	\$350	\$550-\$1480	\$300	\$396-\$1250
Integrative & Functional Medicine Consultations with Nurse Practitioners/PA's	\$300	\$460-\$1250	\$300	\$304-\$950
Integrative Nutrition Consultations	\$160	\$435	\$105	\$372

The prompt pay amount is a discounted rate that is only available on the date of service. If charges are submitted to insurance and the claim is denied or applied to a yearly deductible, the patient will be responsible for the full "fee for service" amount and cannot retroactively elect for the prompt pay rate.