



This Practice uses Reimbursify to file your out-of-network insurance claims and have the reimbursements sent directly to your mailbox!

**OUT-OF-NETWORK CLAIM FILING ACKNOWLEDGEMENT**

1. Your practitioner or their office designee may utilize the Reimbursify software platform (or directly contact your insurance company by other means) to inquire about plan eligibility, “out-of-network” coverage benefits, deductibles, claim filing procedure, and any other information necessary for filing an insurance claim for clinical services.
2. Fees for services are still due in full at the time of service and claims will be filed through Reimbursify only for fully paid services. *All applicable insurance reimbursements will be sent directly to the you, the patient/client, or the main policy holder on your insurance plan.*
3. All health insurance claims require at least one diagnosis code (to describe the reason for the visit/treatment) and one procedure code to describe what was performed (for example, “Individual Psychotherapy – 45 minutes” or “Office Evaluation & Management of a New Patient”). We will submit this information as part of your claim.
4. Occasionally, your insurance company may request clinical documentation to justify the reimbursement. When necessary, we will send the minimal information necessary to justify the claim. Since insurance communications can be slow and/or vague, if you directly receive a notice requesting additional information about a claim, please let the office know as soon as possible.
5. Please be aware that you can opt out of this agreement, however, no insurance reimbursement claims will be submitted on your behalf by your practitioner or office staff.

\_\_\_\_\_  
Patient/Client (or Authorized Guardian) Signature

\_\_\_\_\_  
DATE

\_\_\_\_\_  
Printed Name of Authorized Guardian (if applicable)