

HEALTH INSURANCE CLAIM FORMS

Dr. Moore does not accept insurance, but upon request does provide the standard Health Insurance Claim Form (HICF, pronounced “hick-fuh”) accepted by all insurance companies so you may submit a claim on your own if you have out-of-network mental health benefits. If you would like to do so, please read the following instructions and information.

- If you want to know if you are eligible for partial reimbursement before expending the effort of submitting HICF’s on your own, then please call your insurance to ask if you have “out-of-network mental health benefits,” the amount of your deductible, and whether there are any deadlines related to how soon you must submit a HICF after the date of service or a deadline related to how much time you have to submit claims after the end of the year. Make sure your insurance knows that Dr. Moore never does “single user agreements,” so you are only asking about “out-of-network” mental health benefits.
- Complete the top half of the HICF including boxes 1 through 12. If you are not sure how to complete the form, please contact your insurance company or see the following link:
http://www.nucc.org/%5Cimages%5Cstories%5CPDF%5C1500_claim_form_instruction_manual_2012_02.pdf
- Make sure you do not make any markings in box 13. If you make a stray mark, write “N/A,” or put a dash, your insurance company’s scanner will read it as your signature and send any reimbursement check to Dr. Moore instead of you. Dr. Moore does not accept checks from insurance companies, so do not sign box 13. Please do sign and date in box 12.
- Occasionally, even when the form is filled out correctly (especially the first time you submit it or when a new year starts), an insurance company will incorrectly send the reimbursement check to Dr. Moore. When this happens, Dr. Moore’s office will return the check to the insurance company and notify you so that you may contact your insurance company to correct the problem.
- Please contact your insurance company to ask where to mail mental health claims, because it can be different from the usual mailing address for other claims. Sending the HICF to the wrong address can significantly delay your reimbursement, and it often generates a series of unnecessary mailings to Dr. Moore’s office from your insurance.
- Your HICF also serves as a receipt, so if you wish to keep a receipt for your records, then make a copy or take a photo of it before mailing to insurance.
- If you would like less paperwork and can wait for reimbursement, please contact Dr. Moore’s office to request multiple visits per HICF rather than receiving a separate HICF for each visit. Many patients also avoid unnecessary paperwork by waiting until meeting their deductible before requesting HICF’s. Some wait until the end of the year to request HICF’s. If you choose one of these options, please contact your insurance first to make sure it will not interfere with any deadlines for how soon you must submit a claim after the date of service provided by Dr. Moore and/or any deadlines for submitting claims for the year.
- If you learn from your insurance that reimbursement to you might be higher by using a different code or other change, then please bring that to our attention so Dr. Moore can consider making the change.
- In case you end up discussing the specific procedure codes with your insurance company, here are the most common procedure codes used by Dr. Moore.
 - New intake: 90792
 - Most follow-up appointments require two codes, one for medical evaluation & management (E&M) and the other for psychotherapy based on length of session. The E&M code for most follow-up appointments 99214. The psychotherapy code for most 20-minute appointments is 90833, and for most 45-minute appointments is 90836. As of 6/15/15, the fee of the E&M portion is \$110, and the other code is the remainder of the total cost of your session. You are welcome to request we divide the amounts differently if your insurance advises you of a way to divide it for better reimbursement.
- Please be aware that reimbursement from insurance can vary or may have unanticipated barriers/delays. If you feel you must have partial reimbursement from insurance to afford Dr. Moore’s fees and/or the frequency of appointments Dr. Moore recommends, then Dr. Moore may not be a good fit for you, because you may not be able to count on reimbursement from insurance.
- Claim forms or receipts from Dr. Moore’s office may not be used to file claims with Medicare because Dr. Moore opted out of the Medicare program effective April 1, 2013.
- Please be aware that submitting HICF’s to your insurance means disclosing your mental health diagnosis and the fact that you receive mental health treatment to your insurance company.
- Dr. Moore’s office prepares these HICF’s as a courtesy, above and beyond what is required for a private pay practice, as Dr. Moore does not accept insurance and does not have a relationship with any insurance companies. Please be aware Dr. Moore’s office may stop providing HICF’s in the future and may switch to a “super bill” that patients may still submit to insurance, but requires less time from Dr. Moore’s staff.
- Dr. Moore and her staff will not speak with your insurance company on the phone (except re: medication prior authorization) and are not available to provide guidance about how to interact with insurance. Except for medication prior authorizations, all contact with insurance companies is deferred to the patient. If you have questions related to your insurance, please contact your insurance help desk, customer service, or online support.