

Using Superbills for Reimbursement

Dr. Bartman does not accept health insurance, is not a Medicare provider, and does not assist in the resolution of insurance claims. You are expected to pay for your visits in full at the time of each visit via cash, check, credit card, or HSA/FSA card.

Upon request, our office will provide you with a receipt (called a Suberbill) that you can submit to your private insurance carrier for reimbursement.

What is a Superbill?

- After seeing a physician or specialist who requires payment at the time of service, you will be
 expected to pay by cash, personal check, or personal credit card or HSA/FSA card. A superbill is a
 form completed by a medical practitioner that allows you to be reimbursed directly by your
 health insurance company for the healthcare services for which you paid out of pocket.
- A superbill does not guarantee that an insurance provider will pay for the services provided. Each insurance plan is different. It is your responsibility to contact your insurance provider and find out exactly what will be covered.
- Note that superbills **cannot** be used if you have Medicare, Medicaid, or TriCare insurance. You will pay entirely out of pocket if you wish to seek care outside of these insurance systems. Submitting superbills may even get you in trouble!

Why doesn't Dr. Bartman's office bill my insurance company for me?

The main reasons: fair compensation for work provided, a disinterest in having to fight with 3rd party interests, and, most importantly, commitment to providing you with thorough and excellent care. It also enables us to offer you longer appointments, and takes away the incentive for recommending unnecessary services or procedures. (Insurance companies pay very little for regular visits, but they pay generously for surgeries, procedures, and other invasive treatments.)

Because Dr. Bartman uses natural medicine and alternative vaccination schedules, not taking insurance means the insurance companies cannot threaten to drop us from their networks for ordering specialty testing or for otherwise deviating from their algorithms of care. *This means better care for you*, as it helps us avoid "cookie cutter" medicine.

How do I find out what my insurance company will reimburse for an out-of-network provider?

The only way to know for sure what your insurance company will pay is to ask them directly. Prior to starting work with a clinician who uses superbills, you should contact your insurance company to gather

Ph: 503-991-5091

Fx: 503-990-6828



information. (Note: Do not bother calling and asking if you have Medicare, Medicaid, or Tricare. Superbills can NOT be submitted to these programs.)

Directions for Calling Private Insurance Carriers to Clarify Benefits: (Not able to bill Medicare, Medicaid, or TriCare)

Required Provider Information

Dr. Elizabeth Bartman NPI#: 1841627809 Tax EIN: 82-2887562

Using the NPI numbers listed above, and the tax ID specified, please contact your insurance company to verify and understand how they see us; as a PCP or Specialist (In Network) under your plan. This can affect your reimbursement when sending in a Superbill.

Member representative you spoke with:	Date:
Benefits/Coverage: Does your Insurance Policy cover a Naturopathic P	Physician? Y/N
Copay:	Coinsurance:
Are referrals required to see the physician of your	choice? (If so, please obtain this before your first appointment
Y/N	
Labs: Are specific local labs part of your preferred Tuality?	provider list; for example – Quest, LabCorp, Providence,
Location:	
Deductible:	Remaining:
Is this considered In-Network Coverage for a Natur	opath? Y/N

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Is this considered Out of Network Coverage for a Naturopath? Y / N



<u>Imaging: Are specific local imaging centers part of your preferred provider list; for example – EPIC Imaging, Providence, Tuality?</u>

Location:	
Deductible:	Remaining:
Is this considered In-Network Coverage for Is this considered Out of Network Coverage	•

Your medical information will be released to your insurance provider.

Should you choose to submit a superbill, you are waiving some of your rights to privacy and confidentiality. It is standard for your insurance company to request and keep a record of your diagnosis as part of your permanent medical file. These files can be used by insurance companies to set your rates and to allow or disallow further treatment. (This policy is no different than when a doctor bills insurance for you. If anything, we find we get fewer requests as an out-of-network clinic).

It takes about 30 days to receive your check in the mail. If your check accidentally is sent to the office, we will sign it over to you and mail it to your address on file.

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