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Physical Therapy for EveryBODY is an out-of-network provider for insurance, meaning that the clinic is not contracted with insurance companies. This worksheet can help you understand your potential for reimbursement from your insurance company. At the end of your clinic visit, you will be given a form that contains all the information you should need to submit your receipt to your insurance company.

It is recommended that you call your insurance company and speak with a customer service representative using the questions listed below. Often, a toll free number can be found on the back of your insurance card.

1. Date of Phone Call:
2. What is your name? Document the name of the Customer Service Representative you spoke with:
3. What are my out-of-network physical therapy benefits?
4. Do I have a deductible? Yes/No
5. If yes, how much is my deductible?
6. How much of my deductible has been met?
7. Do I need a prescription from a doctor? Yes/No
8. Does the prescription need to come from my primary care provider? Yes/No

If yes, contact your MD office

9. Do I need an authorization on file prior to starting physical therapy? Yes/No
10. If yes, is an authorization on file?
11. Is there a special form I need to be reimbursed? If yes, where is the form?
12. To what mailing address should I send documents for reimbursement?