

Common Insurance Myths

Myth #1: I have insurance so they should pay for everything.

It is rare for an insurance plan to pay for all of your doctor's bills. Most of the time, you are required to meet an annual deductible and then pay a co-pay or co-insurance. Furthermore, very few health insurances pay for wellness/preventative care, which we recommend after your symptoms resolve. In the same way an auto insurance does not pay for an oil change or new windshield wipers, your health insurance does not pay for all of your health related expenses.

Myth #2: If I receive a bill from the doctor, it means my visit wasn't covered by insurance.

This is not necessarily the case. Many times insurance will pay for part of the charges and make you responsible for the remaining amount. If you receive a bill, it may mean that your insurance did pay but did not pay the full amount, meaning you are responsible for the difference. Your explanation of benefits (EOB) from the insurance will detail which services were covered and for how much, so you can know why there is a charge.

Myth #3: The staff at Compass Chiropractic should know what my policy covers.

As a courtesy to patients, we can find out your policy information before you incur any charges. However, we highly recommend you do the same to make sure they are giving you the same information as they are giving us. It is ultimately your responsibility to know what your plan does and does not cover.

The best way to know for certain whether we can accept your insurance is to **call the phone number on the back of your insurance card to get a quote of your chiropractic benefits**. Here are some questions you should ask the insurance representative who answers the phone:

- A. Does my plan cover chiropractic visits? If so, how many visits are allowed per year?
- B. Will I have to pay a deductible, co-pay, or co-insurance on my chiropractic visits?
 - If you have a deductible, be sure to ask how much you have remaining to meet it.
- C. Do I have a separate chiropractic deductible?
- D. What services are covered besides chiropractic adjustments?
- E. What are my out-of-network benefits? (if we are not in-network with your insurance)

Myth #4: Since I am paying for insurance, I should use it every chance I get.

Some plans have enormous deductibles and/or poor chiropractic benefits. In these cases, it is more cost-effective to self pay for services and bypass your insurance altogether. Believe it or not, it may cost you more to *use* your insurance. We can help figure out what option is best for you.



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