

# ***INSURANCE REQUIREMENTS***

## **Determination of Medical Necessity**

"Medical necessity" is a term developed by insurance companies, not by your physician. Each insurance company develops their own "medical necessity" criteria, which includes several things: physical findings, symptoms, and insurance policy specifics. At The Wisconsin Vein Center, you will undergo a thorough vein evaluation including visual inspection and duplex ultrasound evaluation. Along with this, any vein related symptoms you may be experiencing in your legs will be documented. All of this information will be submitted to your insurance company with a proposed plan of care. It is then up to your insurance company to approve or decline coverage for your vein treatments.

## **Conservative Treatment Guidelines**

Most insurance companies require participation in a period of **conservative treatment** before they will pay for medically necessary vein treatments. This **conservative treatment** includes:

- Regular use of prescription strength medical grade compression stockings
- Periodic leg elevation
- Exercise, walking
- Medication management (use of analgesics such as non-steroidal anti-inflammatory (Ibuprofen or Tylenol)
- Avoidance of prolonged immobility
- Weight reduction (when appropriate)

**The length of time conservative treatment is required prior to vein treatments varies by insurance plan and is anywhere from six weeks to six months.**

Although we are familiar with many of the insurance carrier's requirements, there are some policies we are not familiar with. If your insurance plan is one that we are not familiar with, we ask for your assistance in obtaining this information. Please note that it is extremely important that we have the specific conservative treatment time frame your insurance requires. **If the conservative treatment guidelines set by your insurance company are not followed by you, they may refuse coverage.**

## How to Identify Your Insurance Company's Conservative Treatment Guideline

If we have indicated that we do not know the conservative treatment guideline for your insurance company, please call your insurance company (using the number listed on the back of your insurance card) and ask them the following questions:

1. Is there any conservative treatment that I must try before I have any vein procedures?
2. If so, how long do I need to complete the conservative treatments?

After you obtain this information, please call our office. We will then schedule an appointment in order to document that you have completed your insurance requirements.

### Obtaining Insurance Pre-Authorization of Vein Treatments

Prior to scheduling any vein treatments, a pre-authorization for the recommended vein treatments will be submitted to your insurance company. Once the pre-authorization request is submitted, it generally takes 4-6 weeks for your insurance company to reply to this request.

Once we receive a response, we can begin scheduling your vein treatments. You are welcome to call your insurance company to attempt to expedite the pre-authorization procedure.

### Co-Insurance & Deductibles

If your insurance has authorized coverage of your vein treatment, please plan to pay the **ESTIMATED co-insurance and/or deductible amount the day of the procedure.** This is our best **ESTIMATE** and it may vary depending on the way your insurance processes it. Your portion may be more if it is considered out-of-network. Please refer to the Pre-Determination information sent to you by our office.