



How to Submit for Insurance Reimbursement

Many of our patients with **PPO insurance**, **Health Savings Accounts (HSA)**, or **Flexible Spending Accounts (FSA)** are eligible to be reimbursed directly for treatments received at our clinic. Here's how to submit your **superbill** or payment documentation for reimbursement.

Step 1: Request Your Superbill

After your visit, ask us for a **superbill** — a detailed receipt that includes:

- Your name and insurance ID number (*you MUST fill this in yourself*)
- Our clinic name, NPI, and license number
- Treatment dates, diagnosis (ICD-10) codes, and procedure (CPT) codes
- The total amount paid

 *Tip: Keep copies of all superbills for your personal records.*

Step 2: Using HSA or FSA Funds

You can use **HSA or FSA funds** to pay for eligible healthcare expenses such as acupuncture treatments and wellness visits. You may:

- Pay for your visit using your **HSA/FSA debit card** directly at checkout, or
- Pay out of pocket and **submit your superbill** to your HSA/FSA administrator for reimbursement.

If your account requests supporting documentation, the superbill serves as proof of a qualified medical expense. If more documentation is requested from you, please contact our office.

Step 3: Submit to Your Insurance (for PPO Plans)

If you have a PPO plan with **out-of-network benefits**, you can submit your superbill to your insurance company for potential reimbursement. Check your insurance card or call Member Services for instructions on where to send your claim. You can usually:

- **Submit online** through your insurance member portal, or
- **Mail** your claim form and superbill to the address listed for “Out-of-Network Claims.”

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Step 4: Complete a Claim Form

Most insurance companies require a short **claim form** with your superbill.

Search online for:

“[Your insurance company] out-of-network claim form.”

Complete it, attach your superbill, and submit it as directed.

Step 5: Track Your Reimbursement

Once submitted:

- Processing usually takes **2–6 weeks**.
 - The insurance company will **send payment directly to you**, not the clinic.
 - You can log into your member portal to track claim status.
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Important Notes

- Reimbursement depends on your **plan’s out-of-network benefits and deductible**.
 - Some services may not be covered or reimbursed at full rates.
 - **HMO** and **EPO** plans typically do *not* reimburse for out-of-network services.
 - The clinic does *not* store or submit insurance information; patients handle this process independently.
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Need Help?

We’re happy to provide superbills and general guidance.

Because every insurance plan is unique, we recommend contacting your insurance provider for specific coverage and claim instructions.