

Document for Verifying Insurance Benefits

Studio I – (Michigan)

NPI - 194243140 Tax ID – 38-2943814
 2540 Paulmar Ave, St Joseph, MI 49085
 269-428-3400 (P) 269-428-4828 (F)

Studio I – (Indiana)

NPI – 1649572256 Tax ID – 27-3152954
 5340 Holy Cross Parkway Mishawaka, IN 46545
 574-231-6470 (P) 574-231-6472 (F)

Prior to calling your Insurance Company, it may be helpful to have your Diagnosis Code. They will also need the boutique Tax ID and NPI # stated above. We hold multiple contracts between both locations.

Please check both location Tax ID and NPI #'s for In-Network status. Your appointment can be held at either location.

Name of the Representative you are speaking with? _____

Document the Date and Time of your call. _____

Is Studio I in Network with your Insurance Company?	YES	NO
Does your policy have an annual deductible?	YES	NO
If yes, has it been met?	YES	NO

If no, what is the amount that remains? _____

Do you have an Out Of Pocket Cost? _____

If yes, what amount is remaining? _____

Does your policy have a co-insurance?	YES	NO
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If yes, what is the % rate you are responsible for? _____

L8000 – Mastectomy Bra	How many _____	How often _____
L8001 – Mastectomy Bra w/ Integrated prosthesis	How many _____	How often _____
L8002 – Mastectomy Bra w/ Bi-lateral Integrated Prosthesis	How many _____	How often _____
L8010 – Mastectomy Sleeve	How many _____	How often _____
L8015 – After Surgery Garment	How many _____	How often _____
L8020 – Non Silicone Breast Prosthesis	How many _____	How often _____
L8030 – Silicone Breast Prosthesis	How many _____	How often _____
L8031 – Silicone Breast prosthesis Attachable	How many _____	How often _____
L8032 - Reusable Nipple Prosthesis	How many _____	How often _____
L8035 – Custom breast Prosthesis	How many _____	How often _____
S8424 – Ready Gradient Sleeve	How many _____	How often _____
S8427 – Ready Gradient Glove	How many _____	How often _____
S8428 – Ready Gradient Gauntlet	How many _____	How often _____
A9282 – Wig Any Type (Cranial Prosthesis)	How many _____	How often _____

Is there a maximum allowable payable amount or cap for a cranial prosthesis? Is it an allowed benefit for Cancer or Alopecia?

Please verify if the item(s) are an allowed benefit under your specific plan.

Verify if eligible for more than 1 prosthesis/bra type per benefit period.