

## Getting Covered for Alternative Medicine

Acupuncture, chiropractic care and massage therapy have one thing in common: They may not be covered by insurance. That's because they may be looked at as alternative treatments, not part of conventional medical care. Alternative medicine goes under many names. It may be called complementary and alternative medicine, integrative medicine, functional medicine or holistic medicine. It includes many treatments, such as aromatherapy, biofeedback, biofield therapies, dietary supplements, electromagnetic therapy, guided imagery, homeopathy, hypnotherapy, meditation, naturopathy, nutritional counseling, relaxation training, traditional Chinese medicine and yoga.

Whatever the name or the treatment, many insurers don't cover it. They may view it as experimental, lacking enough evidence to show it works. (For other types of services that insurers may not cover, see [Healthcare Services Not Covered by Health Insurance](#).)

If you want alternative medicine, this article will show you under what circumstances such services may be covered. Even if insurance won't cover it, this article will show how you may be able to reduce your out-of-pocket costs.

### Find Out What Your Insurer Covers

Health plans differ. Some plans cover acupuncture, for example, while others don't. Before you get an alternative treatment, contact your plan's member services representative or check your plan documents or website. Find out:

- Does your plan cover that treatment?
- Are there any specific requirements, such as preauthorization, or having a referral or a prescription from your doctor?
- Are there any limits, such as on the number of visits or how much your plan will pay?
- Are there providers of the alternative treatment in your plan's network? If so, what are their names and contact information? (A network is a group of providers who have agreed to take your plan's contracted rate as payment in full.)

Keep records of any contacts with the insurer, in case you have a claim dispute later.

Certain types of alternative medicine may be more likely than others to be covered. A visit to a chiropractor, for example, may be covered, but a visit to a homeopath might not be.

Sometimes a treatment will be covered for a specific use, but not other uses. Nutritional counseling, for example, may be covered if you have diabetes. But if you don't, it may not be covered. Similarly, massage therapy may be covered only for certain conditions.

### Use Doctors and Licensed Practitioners

Who is providing your alternative care? If it's a doctor, the treatment may be more likely to be covered than if it's not. Your plan may cover alternative care only if it's prescribed by a doctor. Even if the practitioner isn't a doctor, plans generally require that he or she be licensed.

### Make a Case to Your Insurer to Cover the Treatment

Your insurer may deny a claim for a treatment because they think it's experimental or unproven. If so, you and your provider may be able to make a case to the insurer that there is evidence that the treatment works, and could work for you. You can support your case as appropriate with a letter from your provider or journal articles showing the treatment is safe and effective. You might point out the low cost of alternative treatment compared to a higher-cost conventional procedure (or medication) for the same condition. Depending on your provider's assessment, you also may suggest that the alternative treatment might work better for you than a conventional option. For more, see [Experimental Treatments and Clinical Trials](#).

### Look for a Plan That Covers Your Treatment

Do you want a certain kind of alternative treatment? Then, you can consider that when shopping for a health plan. You can look for a new plan at open enrollment time, which is usually in the fall. Do you have a job-based plan or a Health Insurance Marketplace plan? If so, you can also look for a plan when certain life events happen. Such events include getting married or having a baby. (See [When Can You Enroll in a Health Plan?](#))

See if you can find a health plan that covers the specific treatment you want. Find out if you need a special rider or supplement to the plan for the treatment to be covered. (A rider is an additional provision.) Ask if the insurer

offers a discount program. In such a program, you pay out of pocket for alternative medical services but at a lower rate.

When you shop, don't forget to consider all the other things that make a health plan worthwhile. Those include affordable costs and a strong network of providers. For more on what to consider, see [Choosing a Health Plan](#).

#### **Use an Out-of-Network Benefit if You Have One**

Some alternative care providers don't take insurance. If yours doesn't, you'll have to pay out of pocket for the service you get. But you may be able to get reimbursed at least in part. That would be if your plan covers the service and covers care by out-of-network providers. (An out-of-network provider is one who's not in your plan's network. See [In-Network and Out-of-Network Care](#).) Plans often have higher copays, deductibles and coinsurance for out-of-network care than in-network care. So you'll probably pay more than for in-network care even if your plan has an out-of-network benefit.

#### **Lower Your Costs**

Suppose you do have to pay a provider out of pocket. That might happen because the provider doesn't take insurance or because your plan doesn't cover the service. There are steps you can take to cut your costs.

##### *Negotiate Your Costs*

Before you agree to get care, find out what the cost will be. Then check our [FAIR Health Medical Cost Lookup Tool](#). There you can see how much providers typically charge for that service in your geographic area. Not all alternative medical services are listed in the tool. For example, if you search for *acupuncture* or *chiropractic*, there are procedure codes for several such services. (Your practitioner can tell you which code is right for the service planned for you.) But if you search for *reflexology* or *meditation*, you won't find procedure codes.

If the service is listed, you'll receive a typical out-of-network and in-network price for the service in your area. Compare those prices to the amount your provider is charging. Is your provider charging more? Then, ask if the provider would consider offering a price closer to one of those estimates. For more on negotiating costs, see [Using FAIR Health Cost Estimates to Negotiate the Costs of Care](#).

You can also ask if the provider offers a discount for patients who pay up front. Would you rather spread out the payments? If so, ask if the provider is willing to set up a payment plan. You might also ask if your provider has a sliding scale based on income.

##### *Flexible Spending Plans*

Another option is to use a flexible spending plan to pay for your alternative medical care. (See [Flexible Spending Plans](#) for more information.) Such plans allow you to save by using pre-tax dollars to pay for healthcare services. The services you use have to be on the list of medical services approved by the Internal Revenue Service. Some alternative medical services are on that list (such as acupuncture and chiropractic care); others aren't. The benefits administrator of your flexible spending plan will be able to tell you which ones are. Or, you can check the list [here](#). To use a flexible spending plan, you'll need to keep receipts. You may need a letter of medical necessity from your practitioner. For example, if you want the plan to pay for vitamins, the letter will explain why they're medically necessary.

#### **Your Action Plan: Get Covered for and Save Money on Alternative Medicine**

- Find out if your insurer covers your alternative treatment.
- Use doctors and licensed practitioners.
- If your insurer doesn't cover the alternative treatment, make a case to them why they should.
- Look for a health plan that covers the treatment.
- Use an out-of-network benefit, if you have one, to get reimbursed for out-of-network care.
- Lower your costs by negotiating costs and using a flexible spending plan.