

## [Demo] NLP Dataset for Customer Service Automation

<b>Company Type</b>	Health Insurance Companies
<b>Inquiry Category</b>	Appeals, grievances, and complaint handling
<b>Inquiry Sub-Category</b>	Grievances regarding coverage issues
<b>Description</b>	Customers may express grievances related to coverage limitations, network providers, or treatment pre-authorization, seeking a resolution and clarification on their current health insurance plan.
<b>Data Size</b>	9,631 paraphrases
<b>Want to buy data?</b>	Please contact <a href="mailto:nlp-data@gross.me">nlp-data@gross.me</a> via your business email address.

**Masked sample paraphrases of one "Health Insurance Company" customer inquiry. (Purchased data will not be masked.)**

\_\_\_\_\_ my options if my \_\_\_\_\_ doesn't \_\_\_\_\_ certain \_\_\_\_\_ medications?  
 What is the next step \_\_\_\_\_ care?  
 What \_\_\_\_\_ I \_\_\_\_\_ my plan \_\_\_\_\_ this?  
 \_\_\_\_\_ can \_\_\_\_\_ done \_\_\_\_\_ the \_\_\_\_\_ that are \_\_\_\_\_ included in \_\_\_\_\_ policy?  
 \_\_\_\_\_ alternatives \_\_\_\_\_ that aren't \_\_\_\_\_ by \_\_\_\_\_ plan?  
 What \_\_\_\_\_ done \_\_\_\_\_ is \_\_\_\_\_ included in our current plan.  
 Is there \_\_\_\_\_ option \_\_\_\_\_ my \_\_\_\_\_ cover \_\_\_\_\_ medical \_\_\_\_\_?  
 If \_\_\_\_\_ plan \_\_\_\_\_ cover \_\_\_\_\_ what \_\_\_\_\_ I do?  
 Suggestions \_\_\_\_\_ my \_\_\_\_\_ does \_\_\_\_\_ some \_\_\_\_\_?  
 \_\_\_\_\_ to do if my \_\_\_\_\_ doesn't cover \_\_\_\_\_ care?  
 \_\_\_\_\_ plan denies \_\_\_\_\_ how will I deal \_\_\_\_\_?  
 \_\_\_\_\_ done if our plan doesn't cover \_\_\_\_\_?  
 When my \_\_\_\_\_ ditches \_\_\_\_\_ do \_\_\_\_\_?  
 \_\_\_\_\_ certain \_\_\_\_\_ or therapies, is there any \_\_\_\_\_ option?  
 \_\_\_\_\_ options if my \_\_\_\_\_ excludes certain \_\_\_\_\_?  
 \_\_\_\_\_ essential procedures \_\_\_\_\_ not included \_\_\_\_\_ my \_\_\_\_\_ will \_\_\_\_\_ alternatives?  
 What \_\_\_\_\_ if \_\_\_\_\_ plan excludes \_\_\_\_\_?  
 If my \_\_\_\_\_ excludes \_\_\_\_\_ alternatives are out \_\_\_\_\_?  
 Do you know \_\_\_\_\_ can \_\_\_\_\_ if \_\_\_\_\_ won't cover \_\_\_\_\_?  
 \_\_\_\_\_ options when my \_\_\_\_\_ stiffs me \_\_\_\_\_ treatment?  
 What can \_\_\_\_\_ do when \_\_\_\_\_ isn't \_\_\_\_\_ coverage \_\_\_\_\_?  
 Should \_\_\_\_\_ if \_\_\_\_\_ doesn't cover some treatments?  
 \_\_\_\_\_ able to \_\_\_\_\_ if \_\_\_\_\_ excludes certain therapies?  
 \_\_\_\_\_ can I find \_\_\_\_\_ a \_\_\_\_\_ outside the scope \_\_\_\_\_ my \_\_\_\_\_?  
 What \_\_\_\_\_ and medication do not get \_\_\_\_\_?  
 \_\_\_\_\_ to \_\_\_\_\_ medication or treatment plans?  
 When \_\_\_\_\_ scraps treatments \_\_\_\_\_ happens?  
 Can you tell me \_\_\_\_\_ uncovered medications in \_\_\_\_\_?

Is there any \_\_\_\_\_ if \_\_\_\_\_ insurance \_\_\_\_\_ not \_\_\_\_\_?

\_\_\_\_\_ some \_\_\_\_\_ in my insurance \_\_\_\_\_ will there \_\_\_\_\_ any \_\_\_\_\_ options?

\_\_\_\_\_ be \_\_\_\_\_ medical services that aren't \_\_\_\_\_ policy.

\_\_\_\_\_ are alternatives if \_\_\_\_\_ treatment \_\_\_\_\_.

What \_\_\_\_\_ if \_\_\_\_\_ or drugs?

I want \_\_\_\_\_ what \_\_\_\_\_ if \_\_\_\_\_ plan excludes \_\_\_\_\_.

What \_\_\_\_\_ I \_\_\_\_\_ if my \_\_\_\_\_ medications?

\_\_\_\_\_ some \_\_\_\_\_ procedures \_\_\_\_\_ included in my \_\_\_\_\_ will I \_\_\_\_\_ any \_\_\_\_\_?

\_\_\_\_\_ can \_\_\_\_\_ do \_\_\_\_\_ specific \_\_\_\_\_ not included in \_\_\_\_\_ existing plan?

What \_\_\_\_\_ be done \_\_\_\_\_ our \_\_\_\_\_ cover \_\_\_\_\_ medical care?

\_\_\_\_\_ if \_\_\_\_\_ plan doesn't cover certain treatments \_\_\_\_\_ pills?

If certain \_\_\_\_\_ are \_\_\_\_\_ by \_\_\_\_\_ are \_\_\_\_\_ any \_\_\_\_\_?

What do \_\_\_\_\_ do about this, \_\_\_\_\_ cover \_\_\_\_\_?

If some \_\_\_\_\_ included \_\_\_\_\_ my insurance \_\_\_\_\_ will \_\_\_\_\_ have a \_\_\_\_\_?

\_\_\_\_\_ I \_\_\_\_\_ my plan won't cover \_\_\_\_\_ crap?

What \_\_\_\_\_ I do \_\_\_\_\_ my plan \_\_\_\_\_ treatment?

What action \_\_\_\_\_ I \_\_\_\_\_ if \_\_\_\_\_ excludes specific \_\_\_\_\_?

Treatments \_\_\_\_\_ alternatives?

What \_\_\_\_\_ my medical scheme \_\_\_\_\_ cover my \_\_\_\_\_?

If \_\_\_\_\_ medicine \_\_\_\_\_ the scope of what's \_\_\_\_\_ scheme, \_\_\_\_\_ there backup \_\_\_\_\_.

What \_\_\_\_\_ be taken if \_\_\_\_\_ doesn't cover \_\_\_\_\_?

\_\_\_\_\_ excludes \_\_\_\_\_ and therapies, \_\_\_\_\_ alternatives are available?

If a \_\_\_\_\_ not within \_\_\_\_\_ your scheme, \_\_\_\_\_ there \_\_\_\_\_ measures?

\_\_\_\_\_ if \_\_\_\_\_ or medication isn't \_\_\_\_\_?

\_\_\_\_\_ essential procedures \_\_\_\_\_ included \_\_\_\_\_ my \_\_\_\_\_ I have choices?

\_\_\_\_\_ treatment isn't covered, \_\_\_\_\_?

\_\_\_\_\_ I do \_\_\_\_\_ the \_\_\_\_\_ plan doesn't \_\_\_\_\_ treatments?

\_\_\_\_\_ my plan fails \_\_\_\_\_ cover \_\_\_\_\_ what \_\_\_\_\_ do?

Is \_\_\_\_\_ option \_\_\_\_\_ plan doesn't \_\_\_\_\_ coverage \_\_\_\_\_ certain medical \_\_\_\_\_?

I am wondering \_\_\_\_\_ my \_\_\_\_\_ doesn't cover treatments.

If there \_\_\_\_\_ isn't within \_\_\_\_\_ scope \_\_\_\_\_ what's protected, \_\_\_\_\_ there backup \_\_\_\_\_?

If my plan \_\_\_\_\_ what should \_\_\_\_\_ do?

\_\_\_\_\_ when \_\_\_\_\_ plan excludes certain medications?

\_\_\_\_\_ anything \_\_\_\_\_ come into play \_\_\_\_\_ plan \_\_\_\_\_ certain \_\_\_\_\_?

\_\_\_\_\_ insurance doesn't pay for \_\_\_\_\_ what \_\_\_\_\_ be \_\_\_\_\_?

If \_\_\_\_\_ are denied, \_\_\_\_\_ other \_\_\_\_\_?

\_\_\_\_\_ there \_\_\_\_\_ if treatment is denied?

What choices do \_\_\_\_\_ won't cover treatments?

\_\_\_\_\_ I \_\_\_\_\_ luck if my \_\_\_\_\_ doesn't \_\_\_\_\_ specific \_\_\_\_\_ or \_\_\_\_\_?

\_\_\_\_\_ there \_\_\_\_\_ outside \_\_\_\_\_ the scope \_\_\_\_\_ my \_\_\_\_\_ can I find alternatives?

Is there any \_\_\_\_\_ options \_\_\_\_\_ insurance doesn't \_\_\_\_\_ treatments?

\_\_\_\_\_ options do I have \_\_\_\_\_ medicare plan \_\_\_\_\_?

Can \_\_\_\_\_ me know \_\_\_\_\_ I can \_\_\_\_\_ my \_\_\_\_\_ doesn't \_\_\_\_\_ treatments?

If some \_\_\_\_\_ are \_\_\_\_\_ there \_\_\_\_\_?

Can there be other options \_\_\_\_\_ doesn't \_\_\_\_\_ certain \_\_\_\_\_?

If \_\_\_\_\_ plan \_\_\_\_\_ how do I \_\_\_\_\_ with \_\_\_\_\_?

If my plan \_\_\_\_\_ treatments, what \_\_\_\_\_ do?

\_\_\_\_\_ procedures aren't included in \_\_\_\_\_ insurance \_\_\_\_\_ what will \_\_\_\_\_?

Can you \_\_\_\_\_ I \_\_\_\_\_ do if \_\_\_\_\_ by my plan?

What can be \_\_\_\_\_ insurance will \_\_\_\_\_ for \_\_\_\_\_?

There are \_\_\_\_\_ plan doesn't \_\_\_\_\_ drugs or therapies.  
 \_\_\_\_\_ tell me \_\_\_\_\_ I can do if \_\_\_\_\_ doesn't pay \_\_\_\_\_?  
 \_\_\_\_\_ I \_\_\_\_\_ another option if \_\_\_\_\_ is a \_\_\_\_\_ outside my \_\_\_\_\_?  
 What can \_\_\_\_\_ do \_\_\_\_\_ plan \_\_\_\_\_ some treatments?  
 \_\_\_\_\_ plan \_\_\_\_\_ paying \_\_\_\_\_ treatments, \_\_\_\_\_ can I do?  
 \_\_\_\_\_ the medicine \_\_\_\_\_ within \_\_\_\_\_ scope \_\_\_\_\_ what's protected \_\_\_\_\_ are there \_\_\_\_\_ measures?  
 What do I do \_\_\_\_\_ isn't \_\_\_\_\_ in \_\_\_\_\_?  
 Can \_\_\_\_\_ tell me \_\_\_\_\_ do \_\_\_\_\_ doesn't cover stuff?  
 \_\_\_\_\_ options with \_\_\_\_\_ insurance coverage on certain \_\_\_\_\_?  
 \_\_\_\_\_ be done when \_\_\_\_\_ will not \_\_\_\_\_ for \_\_\_\_\_?  
 \_\_\_\_\_ treatment or medicine if it's not \_\_\_\_\_?  
 \_\_\_\_\_ are the \_\_\_\_\_ if \_\_\_\_\_ plan won't cover \_\_\_\_\_ treatments \_\_\_\_\_?  
 How can I \_\_\_\_\_ other \_\_\_\_\_ there \_\_\_\_\_ a \_\_\_\_\_ outside my \_\_\_\_\_?  
 \_\_\_\_\_ treatments are \_\_\_\_\_ covered?  
 What options \_\_\_\_\_ available if \_\_\_\_\_.  
 \_\_\_\_\_ medicare plan \_\_\_\_\_ therapies \_\_\_\_\_ what options do I \_\_\_\_\_?  
 What should \_\_\_\_\_ do if my \_\_\_\_\_ doesn't \_\_\_\_\_?  
 \_\_\_\_\_ what \_\_\_\_\_ treatment \_\_\_\_\_ medication \_\_\_\_\_ included?  
 If there \_\_\_\_\_ treatment that falls \_\_\_\_\_ plan, \_\_\_\_\_ options can \_\_\_\_\_?  
 If \_\_\_\_\_ medicine is denied \_\_\_\_\_ coverage, \_\_\_\_\_ recourse?  
 \_\_\_\_\_ should happen \_\_\_\_\_ not \_\_\_\_\_ medication \_\_\_\_\_ is paid?  
 If \_\_\_\_\_ not included in my insurance, will \_\_\_\_\_?  
 \_\_\_\_\_ you tell \_\_\_\_\_ what to \_\_\_\_\_ if \_\_\_\_\_ doesn't cover \_\_\_\_\_?  
 If \_\_\_\_\_ essential procedures are not \_\_\_\_\_ insurance \_\_\_\_\_ there be any \_\_\_\_\_?  
 \_\_\_\_\_ can \_\_\_\_\_ other options \_\_\_\_\_ there \_\_\_\_\_ is outside my plan.  
 Can \_\_\_\_\_ what \_\_\_\_\_ if my \_\_\_\_\_ does not cover \_\_\_\_\_ treatments?  
 \_\_\_\_\_ plan \_\_\_\_\_ pay \_\_\_\_\_ therapies, \_\_\_\_\_ can I do?  
 How can I \_\_\_\_\_ plan \_\_\_\_\_ pay \_\_\_\_\_ treatment?  
 \_\_\_\_\_ my plan doesn't \_\_\_\_\_ treatments or \_\_\_\_\_ what \_\_\_\_\_ I \_\_\_\_\_?  
 \_\_\_\_\_ essential \_\_\_\_\_ in my insurance \_\_\_\_\_ I be \_\_\_\_\_ without options?  
 What \_\_\_\_\_ I do if my \_\_\_\_\_ cover \_\_\_\_\_ treatments \_\_\_\_\_?  
 \_\_\_\_\_ that I need \_\_\_\_\_ covered \_\_\_\_\_ my plan.  
 What \_\_\_\_\_ the \_\_\_\_\_ step \_\_\_\_\_ doesn't cover \_\_\_\_\_ medical care?  
 What \_\_\_\_\_ if \_\_\_\_\_ doesn't \_\_\_\_\_ medical \_\_\_\_\_?  
 \_\_\_\_\_ to \_\_\_\_\_ I can \_\_\_\_\_ my plan doesn't cover certain \_\_\_\_\_.  
 \_\_\_\_\_ my plan \_\_\_\_\_ the treatments, \_\_\_\_\_ can \_\_\_\_\_ do?  
 Will \_\_\_\_\_ be \_\_\_\_\_ alternatives \_\_\_\_\_ my treatment \_\_\_\_\_ covered?  
 What \_\_\_\_\_ is \_\_\_\_\_ covered.  
 \_\_\_\_\_ plan excludes specific \_\_\_\_\_ do I \_\_\_\_\_?  
 \_\_\_\_\_ help when \_\_\_\_\_ plan \_\_\_\_\_ prescriptions and \_\_\_\_\_?  
 If \_\_\_\_\_ treatment or \_\_\_\_\_ isn't \_\_\_\_\_ are \_\_\_\_\_?  
 \_\_\_\_\_ pay for treatments, what should I \_\_\_\_\_?  
 \_\_\_\_\_ my \_\_\_\_\_ doesn't cover certain \_\_\_\_\_ what are \_\_\_\_\_?  
 \_\_\_\_\_ should \_\_\_\_\_ do \_\_\_\_\_ plan doesn't \_\_\_\_\_ for drugs?  
 \_\_\_\_\_ my plan \_\_\_\_\_ extend coverage \_\_\_\_\_ are there \_\_\_\_\_ options?  
 When \_\_\_\_\_ not \_\_\_\_\_ treatments \_\_\_\_\_ can be done?  
 If \_\_\_\_\_ is \_\_\_\_\_ covering certain \_\_\_\_\_ options, how \_\_\_\_\_ proceed?  
 \_\_\_\_\_ my plan excludes certain \_\_\_\_\_ or \_\_\_\_\_ are there \_\_\_\_\_?  
 \_\_\_\_\_ procedures \_\_\_\_\_ not included in my insurance \_\_\_\_\_ will \_\_\_\_\_ be \_\_\_\_\_?  
 \_\_\_\_\_ should \_\_\_\_\_ medical \_\_\_\_\_ cover certain drugs and procedures?

When \_\_\_\_\_ doesn't \_\_\_\_\_ for certain \_\_\_\_\_ measures, \_\_\_\_\_ any alternatives?

\_\_\_\_\_ can I do if \_\_\_\_\_ doesn't \_\_\_\_\_?

Are \_\_\_\_\_ my insurance \_\_\_\_\_ not cover \_\_\_\_\_ treatments?

If my \_\_\_\_\_ medical care \_\_\_\_\_ next?

\_\_\_\_\_ should \_\_\_\_\_ do if the plan \_\_\_\_\_ treatments?

\_\_\_\_\_ my coverage is \_\_\_\_\_ certain medical \_\_\_\_\_ can \_\_\_\_\_ do?

\_\_\_\_\_ someone give me \_\_\_\_\_ about \_\_\_\_\_ with \_\_\_\_\_ prescription?

What's next if \_\_\_\_\_ pay \_\_\_\_\_ medical \_\_\_\_\_?

What would \_\_\_\_\_ if \_\_\_\_\_ ditches \_\_\_\_\_?

Is there \_\_\_\_\_ if my \_\_\_\_\_ excludes \_\_\_\_\_ medications?

\_\_\_\_\_ there any choice if some \_\_\_\_\_ are \_\_\_\_\_ insurance?

\_\_\_\_\_ luck if \_\_\_\_\_ doesn't cover certain drugs and \_\_\_\_\_?

If some \_\_\_\_\_ procedures \_\_\_\_\_ not included \_\_\_\_\_ will I \_\_\_\_\_ without \_\_\_\_\_ choice?

If the medicine you \_\_\_\_\_ isn't within the \_\_\_\_\_ are there backup \_\_\_\_\_?

Is \_\_\_\_\_ any other \_\_\_\_\_ if my \_\_\_\_\_ treatments?

\_\_\_\_\_ plan isn't covering \_\_\_\_\_ medical needs, \_\_\_\_\_ other \_\_\_\_\_?

\_\_\_\_\_ what if \_\_\_\_\_ were not \_\_\_\_\_?

\_\_\_\_\_ alternatives \_\_\_\_\_ if \_\_\_\_\_ plan \_\_\_\_\_ certain therapies?

Does \_\_\_\_\_ alternatives for \_\_\_\_\_ covered by my plan?

Need \_\_\_\_\_ when the \_\_\_\_\_ have \_\_\_\_\_ prescriptions \_\_\_\_\_ treatments?

\_\_\_\_\_ there \_\_\_\_\_ choices if \_\_\_\_\_ are denied?

When \_\_\_\_\_ medical needs aren't \_\_\_\_\_ are \_\_\_\_\_ other options?

If \_\_\_\_\_ covered \_\_\_\_\_ plan, what should I \_\_\_\_\_?

If a medicine is \_\_\_\_\_ but \_\_\_\_\_ the \_\_\_\_\_ of what's protected \_\_\_\_\_ your scheme, \_\_\_\_\_?

What do \_\_\_\_\_ if \_\_\_\_\_ excludes \_\_\_\_\_?

\_\_\_\_\_ if specific medical \_\_\_\_\_ is not \_\_\_\_\_ our current plan?

What \_\_\_\_\_ are \_\_\_\_\_ if \_\_\_\_\_ covered?

\_\_\_\_\_ do \_\_\_\_\_ this plan won't cover some \_\_\_\_\_?

What \_\_\_\_\_ if \_\_\_\_\_ coverage \_\_\_\_\_ covering \_\_\_\_\_ I need?

\_\_\_\_\_ don't know if \_\_\_\_\_ plan will \_\_\_\_\_.

What \_\_\_\_\_ my \_\_\_\_\_ excludes \_\_\_\_\_?

\_\_\_\_\_ do I \_\_\_\_\_ if \_\_\_\_\_ plan \_\_\_\_\_ things?

\_\_\_\_\_ treatment \_\_\_\_\_ is \_\_\_\_\_ by \_\_\_\_\_ is there \_\_\_\_\_ recourse?

\_\_\_\_\_ options do I \_\_\_\_\_ my \_\_\_\_\_ doesn't \_\_\_\_\_ treatments?

What alternatives are \_\_\_\_\_ there, \_\_\_\_\_ aren't \_\_\_\_\_?

\_\_\_\_\_ I \_\_\_\_\_ if I \_\_\_\_\_ for some treatments?

\_\_\_\_\_ plan excludes specific \_\_\_\_\_ can I \_\_\_\_\_?

What if \_\_\_\_\_ plan \_\_\_\_\_ treatments \_\_\_\_\_?

When my insurance stiffs \_\_\_\_\_ there other \_\_\_\_\_?

\_\_\_\_\_ my plan does not \_\_\_\_\_ medical options?

What do I \_\_\_\_\_ if \_\_\_\_\_ plan \_\_\_\_\_ treatment?

\_\_\_\_\_ should \_\_\_\_\_ done \_\_\_\_\_ not \_\_\_\_\_ medication or \_\_\_\_\_ paid?

Do you know what I can \_\_\_\_\_ my \_\_\_\_\_ treatments \_\_\_\_\_?

\_\_\_\_\_ I do if \_\_\_\_\_ is \_\_\_\_\_ coverage \_\_\_\_\_ treatments?

There are actions that can \_\_\_\_\_ pay \_\_\_\_\_ treatments.

\_\_\_\_\_ I \_\_\_\_\_ if \_\_\_\_\_ plan isn't covering my \_\_\_\_\_?

\_\_\_\_\_ are available if \_\_\_\_\_ won't \_\_\_\_\_ for \_\_\_\_\_ treatments?

\_\_\_\_\_ I take \_\_\_\_\_ my medical \_\_\_\_\_ does not cover \_\_\_\_\_?

\_\_\_\_\_ if \_\_\_\_\_ cover certain treatments

\_\_\_\_\_ does \_\_\_\_\_ pay \_\_\_\_\_ some treatments, \_\_\_\_\_ can I do?

\_\_\_\_ case my \_\_\_\_ certain medications \_\_\_\_ options are there?  
 If your \_\_\_\_ of what's protected on \_\_\_\_ are there backup \_\_\_\_?  
 \_\_\_\_ there \_\_\_\_ are \_\_\_\_ covered by my plan?  
 \_\_\_\_ if \_\_\_\_ are denied \_\_\_\_ insurance?  
 \_\_\_\_ won't pay \_\_\_\_ treatments.  
 What \_\_\_\_ done \_\_\_\_ specific medical services not \_\_\_\_ in \_\_\_\_?  
 \_\_\_\_ able \_\_\_\_ do \_\_\_\_ my medicare \_\_\_\_ excludes specific therapies?  
 What can be \_\_\_\_ medical \_\_\_\_ that \_\_\_\_ not \_\_\_\_ of \_\_\_\_?  
 \_\_\_\_ am I \_\_\_\_ take if my \_\_\_\_ excludes \_\_\_\_?  
 \_\_\_\_ procedures are not included \_\_\_\_ coverage, will there \_\_\_\_ no \_\_\_\_?  
 My \_\_\_\_ not \_\_\_\_ certain \_\_\_\_ options.  
 \_\_\_\_ there anything \_\_\_\_ do if \_\_\_\_ excludes \_\_\_\_ therapies?  
 If \_\_\_\_ are \_\_\_\_ in my \_\_\_\_ coverage, what \_\_\_\_ do?  
 \_\_\_\_ if treatment isn't \_\_\_\_?  
 Is \_\_\_\_ any \_\_\_\_ my \_\_\_\_ doesn't \_\_\_\_ particular medications or therapies?  
 Is \_\_\_\_ an alternative if \_\_\_\_ plan doesn't \_\_\_\_ to \_\_\_\_?  
 If \_\_\_\_ plan \_\_\_\_ what \_\_\_\_ I \_\_\_\_?  
 What \_\_\_\_ can be taken if our \_\_\_\_ care?  
 When coverage doesn't \_\_\_\_ certain medicine, \_\_\_\_?  
 \_\_\_\_ I \_\_\_\_ if my \_\_\_\_ doesn't cover \_\_\_\_ medical \_\_\_\_.  
 What \_\_\_\_ there's no \_\_\_\_ for certain treatments?  
 Treatments \_\_\_\_ medication \_\_\_\_ what?  
 \_\_\_\_ know what I \_\_\_\_ do \_\_\_\_ my plan doesn't \_\_\_\_ treatments?  
 \_\_\_\_ treatment \_\_\_\_ is denied by \_\_\_\_ is there \_\_\_\_?  
 \_\_\_\_ can I do \_\_\_\_ going to cover \_\_\_\_ treatments?  
 \_\_\_\_ any option with no insurance \_\_\_\_?  
 What options \_\_\_\_ I \_\_\_\_ my \_\_\_\_ plan \_\_\_\_ treatments?  
 There are \_\_\_\_ for \_\_\_\_ in my plan.  
 \_\_\_\_ be done \_\_\_\_ my medical scheme \_\_\_\_ certain prescriptions \_\_\_\_ procedures?  
 Do I have recourse \_\_\_\_ not \_\_\_\_ certain \_\_\_\_ procedures?  
 \_\_\_\_ for treatments \_\_\_\_ not covered \_\_\_\_ my plan.  
 \_\_\_\_ certain \_\_\_\_ are denied \_\_\_\_ insurance, \_\_\_\_ there \_\_\_\_?  
 What if the \_\_\_\_.  
 \_\_\_\_ suggestions \_\_\_\_ my insurance \_\_\_\_ cover certain \_\_\_\_?  
 \_\_\_\_ are there \_\_\_\_ treatments are \_\_\_\_ covered?  
 What are the \_\_\_\_ if \_\_\_\_ plan \_\_\_\_ drugs?  
 \_\_\_\_ not \_\_\_\_ my plan, are there other \_\_\_\_?  
 Is \_\_\_\_ any \_\_\_\_ ways to \_\_\_\_ covered \_\_\_\_ my plan?  
 \_\_\_\_ provide coverage to certain \_\_\_\_ are there \_\_\_\_ other options?  
 Is \_\_\_\_ possible to have \_\_\_\_ insurance \_\_\_\_ certain \_\_\_\_?  
 \_\_\_\_ next, \_\_\_\_ plan doesn't \_\_\_\_ for medical \_\_\_\_?  
 What happens \_\_\_\_ if \_\_\_\_ some \_\_\_\_?  
 What \_\_\_\_ if we don't have our \_\_\_\_ plan \_\_\_\_ care?  
 \_\_\_\_ plan \_\_\_\_ some treatments?  
 \_\_\_\_ can \_\_\_\_ do \_\_\_\_ not adequate \_\_\_\_ specific treatments?  
 Can \_\_\_\_ what I can \_\_\_\_ if \_\_\_\_ cover some things?  
 \_\_\_\_ do something \_\_\_\_ plan doesn't cover \_\_\_\_ things?  
 Is \_\_\_\_ else \_\_\_\_ do in case my plan \_\_\_\_ certain \_\_\_\_?  
 \_\_\_\_ can I do \_\_\_\_ plan \_\_\_\_ not \_\_\_\_ this?  
 \_\_\_\_ there any \_\_\_\_ with no \_\_\_\_ for \_\_\_\_?

Is it possible \_\_\_\_\_ doesn't cover \_\_\_\_\_?

\_\_\_\_\_ anything else \_\_\_\_\_ consideration \_\_\_\_\_ my plan \_\_\_\_\_ certain \_\_\_\_\_?

What \_\_\_\_\_ I \_\_\_\_\_ if \_\_\_\_\_ cover treatment?

What \_\_\_\_\_ should I \_\_\_\_\_ if my \_\_\_\_\_ scheme \_\_\_\_\_ not \_\_\_\_\_?

\_\_\_\_\_ can \_\_\_\_\_ my plan doesn't include \_\_\_\_\_?

Is \_\_\_\_\_ any other \_\_\_\_\_ when \_\_\_\_\_ stiff \_\_\_\_\_ on \_\_\_\_\_?

In case \_\_\_\_\_ not \_\_\_\_\_ some \_\_\_\_\_ are there other \_\_\_\_\_?

\_\_\_\_\_ that \_\_\_\_\_ is not covered \_\_\_\_\_ plan, what do \_\_\_\_\_?

There \_\_\_\_\_ choices \_\_\_\_\_ coverage doesn't \_\_\_\_\_ medicine?

\_\_\_\_\_ is a \_\_\_\_\_ does not \_\_\_\_\_ within my \_\_\_\_\_ can \_\_\_\_\_ find \_\_\_\_\_ option?

What \_\_\_\_\_ do when \_\_\_\_\_ not have coverage \_\_\_\_\_ treatments?

\_\_\_\_\_ should \_\_\_\_\_ if this plan \_\_\_\_\_ cover \_\_\_\_\_?

\_\_\_\_\_ can \_\_\_\_\_ done about specific medical \_\_\_\_\_ that \_\_\_\_\_ not \_\_\_\_\_?

\_\_\_\_\_ can \_\_\_\_\_ with \_\_\_\_\_ that \_\_\_\_\_ included in my policy?

\_\_\_\_\_ we deal with \_\_\_\_\_ medications in \_\_\_\_\_?

No coverage \_\_\_\_\_ and pills, \_\_\_\_\_?

What \_\_\_\_\_ be \_\_\_\_\_ alternatives if \_\_\_\_\_ is \_\_\_\_\_?

What should \_\_\_\_\_ done \_\_\_\_\_ existing \_\_\_\_\_ doesn't cover \_\_\_\_\_ medical \_\_\_\_\_?

\_\_\_\_\_ options are there if \_\_\_\_\_ doesn't cover \_\_\_\_\_?

Is \_\_\_\_\_ alternative \_\_\_\_\_ treatment or \_\_\_\_\_ is \_\_\_\_\_ covered?

Is there \_\_\_\_\_ options \_\_\_\_\_ specific \_\_\_\_\_ needs \_\_\_\_\_ covered \_\_\_\_\_ my \_\_\_\_\_?

What \_\_\_\_\_ if \_\_\_\_\_ plan won't cover \_\_\_\_\_?

\_\_\_\_\_ can \_\_\_\_\_ do about \_\_\_\_\_ not included \_\_\_\_\_ my \_\_\_\_\_?

\_\_\_\_\_ there anything \_\_\_\_\_ that I \_\_\_\_\_ do if my \_\_\_\_\_ or \_\_\_\_\_?

\_\_\_\_\_ be \_\_\_\_\_ with \_\_\_\_\_ medical services \_\_\_\_\_ in my \_\_\_\_\_?

When my \_\_\_\_\_ on treatment, is \_\_\_\_\_ any \_\_\_\_\_?

Is \_\_\_\_\_ any alternative \_\_\_\_\_ my treatment or \_\_\_\_\_?

\_\_\_\_\_ out \_\_\_\_\_ if it doesn't \_\_\_\_\_ specific drugs?

\_\_\_\_\_ anything else come \_\_\_\_\_ consideration \_\_\_\_\_ plan \_\_\_\_\_ medications?

\_\_\_\_\_ plan \_\_\_\_\_ not \_\_\_\_\_ what are my alternatives?

\_\_\_\_\_ medical \_\_\_\_\_ are \_\_\_\_\_ my \_\_\_\_\_ can be done?

\_\_\_\_\_ my plan \_\_\_\_\_ cover certain therapies, \_\_\_\_\_ options?

\_\_\_\_\_ tell me what I \_\_\_\_\_ doesn't cover some treatment?

\_\_\_\_\_ aren't included \_\_\_\_\_ insurance coverage, \_\_\_\_\_ be other options?

Treatment \_\_\_\_\_ medication \_\_\_\_\_ now?

Possibilities \_\_\_\_\_ treatments not \_\_\_\_\_ by \_\_\_\_\_?

\_\_\_\_\_ if my plan \_\_\_\_\_ cover \_\_\_\_\_?

\_\_\_\_\_ alternatives \_\_\_\_\_ found if \_\_\_\_\_ treatments \_\_\_\_\_ not covered?

\_\_\_\_\_ certain treatments, \_\_\_\_\_ I able to do?

Is \_\_\_\_\_ possible to \_\_\_\_\_ my plan \_\_\_\_\_ for treatments?

\_\_\_\_\_ coverage \_\_\_\_\_ certain medicine, \_\_\_\_\_ choices?

How can I explore \_\_\_\_\_ options if \_\_\_\_\_ plan?

\_\_\_\_\_ can I \_\_\_\_\_ the \_\_\_\_\_ services \_\_\_\_\_ are \_\_\_\_\_ from \_\_\_\_\_ policy?

What should \_\_\_\_\_ my \_\_\_\_\_ does not cover certain \_\_\_\_\_?

\_\_\_\_\_ certain \_\_\_\_\_ aren't \_\_\_\_\_ insurance, are there other \_\_\_\_\_?

\_\_\_\_\_ know \_\_\_\_\_ there are any \_\_\_\_\_ my plan \_\_\_\_\_ not \_\_\_\_\_ coverage.

Is there \_\_\_\_\_ options \_\_\_\_\_ my insurance fails \_\_\_\_\_?

\_\_\_\_\_ I \_\_\_\_\_ do \_\_\_\_\_ plan excludes my treatments?

If \_\_\_\_\_ plan \_\_\_\_\_ cover \_\_\_\_\_ can I do?

\_\_\_\_\_ got if \_\_\_\_\_ will not help?

What should \_\_\_\_\_ if this \_\_\_\_\_ treatments?  
 If certain treatments \_\_\_\_\_ are \_\_\_\_\_?  
 If \_\_\_\_\_ covering certain medical \_\_\_\_\_ I proceed?  
 Are \_\_\_\_\_ alternatives if certain \_\_\_\_\_?  
 \_\_\_\_\_ certain \_\_\_\_\_ are \_\_\_\_\_ insurance \_\_\_\_\_ there other choices?  
 \_\_\_\_\_ happens \_\_\_\_\_ my plan \_\_\_\_\_ involve \_\_\_\_\_?  
 When my \_\_\_\_\_ doesn't \_\_\_\_\_ certain \_\_\_\_\_ are there any \_\_\_\_\_?  
 What \_\_\_\_\_ do \_\_\_\_\_ won't cover treatments?  
 What \_\_\_\_\_ are available to \_\_\_\_\_ covered?  
 What \_\_\_\_\_ do \_\_\_\_\_ medical scheme doesn't \_\_\_\_\_ some \_\_\_\_\_ procedures?  
 \_\_\_\_\_ there \_\_\_\_\_ a \_\_\_\_\_ falls \_\_\_\_\_ my plan, how \_\_\_\_\_ find other options?  
 \_\_\_\_\_ are \_\_\_\_\_ if \_\_\_\_\_ isn't covered?  
 What can I \_\_\_\_\_ plan won't \_\_\_\_\_?  
 Do \_\_\_\_\_ know \_\_\_\_\_ I can do \_\_\_\_\_ doesn't pay \_\_\_\_\_?  
 What \_\_\_\_\_ I do \_\_\_\_\_ not cover specific prescriptions and \_\_\_\_\_?  
 Am I out \_\_\_\_\_ luck if \_\_\_\_\_ doesn't \_\_\_\_\_ for \_\_\_\_\_?  
 \_\_\_\_\_ is not within the \_\_\_\_\_ of the scheme, \_\_\_\_\_ there \_\_\_\_\_?  
 \_\_\_\_\_ options \_\_\_\_\_ plan doesn't cover what \_\_\_\_\_ need?  
 If \_\_\_\_\_ medicine \_\_\_\_\_ not \_\_\_\_\_ scope of \_\_\_\_\_ on your \_\_\_\_\_ are there \_\_\_\_\_?  
 \_\_\_\_\_ insurance \_\_\_\_\_ pay for \_\_\_\_\_ actions \_\_\_\_\_ be taken?  
 If my \_\_\_\_\_ won't cover \_\_\_\_\_ what \_\_\_\_\_ my \_\_\_\_\_?  
 If essential procedures \_\_\_\_\_ not \_\_\_\_\_ in \_\_\_\_\_ coverage, what \_\_\_\_\_?  
 \_\_\_\_\_ another option \_\_\_\_\_ certain treatments \_\_\_\_\_ by \_\_\_\_\_?  
 When \_\_\_\_\_ cover specific treatments, \_\_\_\_\_ done?  
 When my \_\_\_\_\_ cover \_\_\_\_\_ medical \_\_\_\_\_ are \_\_\_\_\_ any \_\_\_\_\_?  
 \_\_\_\_\_ do? My plan \_\_\_\_\_ this stuff.  
 \_\_\_\_\_ other options \_\_\_\_\_ the treatment is \_\_\_\_\_ insurance?  
 Is \_\_\_\_\_ any \_\_\_\_\_ alternatives \_\_\_\_\_ my \_\_\_\_\_ doesn't \_\_\_\_\_ treatments?  
 \_\_\_\_\_ can \_\_\_\_\_ if my plan won't \_\_\_\_\_ specific \_\_\_\_\_?  
 Can \_\_\_\_\_ alternatives \_\_\_\_\_ my treatment is \_\_\_\_\_?  
 \_\_\_\_\_ can I \_\_\_\_\_ my plan \_\_\_\_\_ include certain \_\_\_\_\_?  
 When insurance \_\_\_\_\_ treatments, what can \_\_\_\_\_?  
 \_\_\_\_\_ my plan doesn't \_\_\_\_\_ are my \_\_\_\_\_?  
 \_\_\_\_\_ plan won't \_\_\_\_\_ certain \_\_\_\_\_ what are \_\_\_\_\_ alternatives.  
 \_\_\_\_\_ alternatives if \_\_\_\_\_ plan excludes \_\_\_\_\_ therapies or \_\_\_\_\_.  
 \_\_\_\_\_ my plan excludes certain \_\_\_\_\_ does \_\_\_\_\_ come \_\_\_\_\_?  
 \_\_\_\_\_ plan \_\_\_\_\_ certain \_\_\_\_\_ what alternatives \_\_\_\_\_ available?  
 \_\_\_\_\_ aren't \_\_\_\_\_ what do we do?  
 \_\_\_\_\_ can I \_\_\_\_\_ if the coverage \_\_\_\_\_ cover \_\_\_\_\_?  
 Suggestions \_\_\_\_\_ my \_\_\_\_\_ won't cover \_\_\_\_\_?  
 \_\_\_\_\_ insurance won't \_\_\_\_\_ treatments, what \_\_\_\_\_ can \_\_\_\_\_ taken?  
 If that \_\_\_\_\_ isn't \_\_\_\_\_ in \_\_\_\_\_ what am \_\_\_\_\_ supposed \_\_\_\_\_?  
 \_\_\_\_\_ available if my treatments \_\_\_\_\_ covered?  
 \_\_\_\_\_ covered, what alternatives can I \_\_\_\_\_?  
 Can \_\_\_\_\_ do something \_\_\_\_\_ my \_\_\_\_\_ drugs?  
 If my medicare \_\_\_\_\_ excludes \_\_\_\_\_ do \_\_\_\_\_?  
 What alternatives \_\_\_\_\_ I \_\_\_\_\_ treatments \_\_\_\_\_?  
 Can \_\_\_\_\_ something if my plan \_\_\_\_\_ for \_\_\_\_\_?  
 \_\_\_\_\_ I do \_\_\_\_\_ my plan \_\_\_\_\_ drugs or treatments?  
 \_\_\_\_\_ can I \_\_\_\_\_ if \_\_\_\_\_ plan \_\_\_\_\_ some treatments?

\_\_\_\_\_ won't pay for \_\_\_\_\_ treatments, \_\_\_\_\_ can be \_\_\_\_\_?  
 \_\_\_\_\_ happen \_\_\_\_\_ treatment and \_\_\_\_\_ that is not \_\_\_\_\_?  
 What \_\_\_\_\_ do \_\_\_\_\_ have if my plan \_\_\_\_\_?  
 \_\_\_\_\_ therapy \_\_\_\_\_ are not paid, \_\_\_\_\_?  
 \_\_\_\_\_ my \_\_\_\_\_ pay \_\_\_\_\_ treatments, what are \_\_\_\_\_ alternatives?  
 \_\_\_\_\_ want \_\_\_\_\_ know \_\_\_\_\_ do \_\_\_\_\_ plan doesn't cover certain things.  
 When \_\_\_\_\_ pay for \_\_\_\_\_ what \_\_\_\_\_ be done?  
 I don't \_\_\_\_\_ have \_\_\_\_\_ coverage falls short.  
 Is \_\_\_\_\_ a \_\_\_\_\_ your treatment or \_\_\_\_\_ is \_\_\_\_\_?  
 Does \_\_\_\_\_ medicare plan \_\_\_\_\_ medicines?  
 How can \_\_\_\_\_ if there is \_\_\_\_\_ that \_\_\_\_\_ in \_\_\_\_\_ plan?  
 What are \_\_\_\_\_ options \_\_\_\_\_ my \_\_\_\_\_ excludes \_\_\_\_\_?  
 If there is a \_\_\_\_\_ of \_\_\_\_\_ how can \_\_\_\_\_ different one?  
 Will \_\_\_\_\_ my \_\_\_\_\_ extend coverage \_\_\_\_\_ certain medical measures?  
 If \_\_\_\_\_ plan excludes \_\_\_\_\_ therapies, \_\_\_\_\_ the \_\_\_\_\_ options?  
 \_\_\_\_\_ you \_\_\_\_\_ choices \_\_\_\_\_ coverage \_\_\_\_\_ include some medicine?  
 I don't know \_\_\_\_\_ do if my \_\_\_\_\_ certain treatments \_\_\_\_\_.  
 \_\_\_\_\_ is a treatment that \_\_\_\_\_ plan, how can I \_\_\_\_\_ at \_\_\_\_\_?  
 If \_\_\_\_\_ include \_\_\_\_\_ medications or therapies, \_\_\_\_\_ any other \_\_\_\_\_?  
 \_\_\_\_\_ treatments \_\_\_\_\_ are there other options?  
 \_\_\_\_\_ under \_\_\_\_\_ my plan \_\_\_\_\_ certain medications?  
 \_\_\_\_\_ I \_\_\_\_\_ if my plan \_\_\_\_\_ pay for certain \_\_\_\_\_?  
 What \_\_\_\_\_ can \_\_\_\_\_ if \_\_\_\_\_ doesn't cover \_\_\_\_\_ medical care?  
 What options are \_\_\_\_\_ my \_\_\_\_\_ certain treatments?  
 \_\_\_\_\_ doesn't cover \_\_\_\_\_ therapies, am I \_\_\_\_\_ of \_\_\_\_\_?  
 If my \_\_\_\_\_ doesn't \_\_\_\_\_ what can \_\_\_\_\_ do  
 What \_\_\_\_\_ do \_\_\_\_\_ plan does \_\_\_\_\_ any treatments \_\_\_\_\_ medications?  
 \_\_\_\_\_ with no \_\_\_\_\_ coverage \_\_\_\_\_ certain \_\_\_\_\_?  
 \_\_\_\_\_ know what to \_\_\_\_\_ my medicare \_\_\_\_\_ excludes \_\_\_\_\_ therapies.  
 Possibilities for \_\_\_\_\_ are \_\_\_\_\_ covered by \_\_\_\_\_.  
 \_\_\_\_\_ choices do I \_\_\_\_\_ does not cover \_\_\_\_\_?  
 When that \_\_\_\_\_ in \_\_\_\_\_ do I do?  
 \_\_\_\_\_ can be \_\_\_\_\_ medical \_\_\_\_\_ are \_\_\_\_\_ in my policy.  
 What \_\_\_\_\_ I \_\_\_\_\_ my plan does \_\_\_\_\_ pay \_\_\_\_\_?  
 When my insurance \_\_\_\_\_ me \_\_\_\_\_ treatment \_\_\_\_\_ are \_\_\_\_\_?  
 \_\_\_\_\_ are \_\_\_\_\_ if my medicare plan \_\_\_\_\_ specific \_\_\_\_\_?  
 What alternatives \_\_\_\_\_ if my \_\_\_\_\_ drugs?  
 What options \_\_\_\_\_ I have \_\_\_\_\_ doesn't \_\_\_\_\_ needs?  
 \_\_\_\_\_ are my options \_\_\_\_\_ my \_\_\_\_\_ cover \_\_\_\_\_ treatments?  
 If a medicine is not within \_\_\_\_\_ scope of \_\_\_\_\_ on \_\_\_\_\_ are \_\_\_\_\_?  
 What can \_\_\_\_\_ done \_\_\_\_\_ we \_\_\_\_\_ coverage for \_\_\_\_\_ care?  
 What are \_\_\_\_\_ medicare \_\_\_\_\_ excludes specific \_\_\_\_\_ or medicines?  
 When my \_\_\_\_\_ provide \_\_\_\_\_ medical measures, are there \_\_\_\_\_?  
 What now, \_\_\_\_\_ some \_\_\_\_\_?  
 \_\_\_\_\_ if certain \_\_\_\_\_ aren't \_\_\_\_\_ my insurance?  
 Do I \_\_\_\_\_ do anything \_\_\_\_\_ plan \_\_\_\_\_ cover some \_\_\_\_\_?  
 treatment \_\_\_\_\_ medication not \_\_\_\_\_?  
 If my \_\_\_\_\_ doesn't \_\_\_\_\_ medical options \_\_\_\_\_ should \_\_\_\_\_?  
 What options are \_\_\_\_\_ excludes certain drugs?  
 \_\_\_\_\_ know if I'm \_\_\_\_\_ luck if my plan \_\_\_\_\_ treatments.



\_\_\_\_\_ coverage is \_\_\_\_\_ adequate for certain treatments?

\_\_\_\_\_ done \_\_\_\_\_ medical \_\_\_\_\_ is not \_\_\_\_\_ by the \_\_\_\_\_ plan.

\_\_\_\_\_ options \_\_\_\_\_ if \_\_\_\_\_ doesn't help?

\_\_\_\_\_ recourse for treatment that \_\_\_\_\_ denied by \_\_\_\_\_?

What are \_\_\_\_\_ my \_\_\_\_\_ won't \_\_\_\_\_ something?

What \_\_\_\_\_ we \_\_\_\_\_ if therapy \_\_\_\_\_ medication \_\_\_\_\_ paid?

If \_\_\_\_\_ essential procedures \_\_\_\_\_ not included \_\_\_\_\_ my \_\_\_\_\_ coverage, will \_\_\_\_\_?

Are \_\_\_\_\_ alternative \_\_\_\_\_ covered by my plan?

If my plan \_\_\_\_\_ not cover \_\_\_\_\_ I \_\_\_\_\_ it?

\_\_\_\_\_ I do if my \_\_\_\_\_ does not pay \_\_\_\_\_?

If there \_\_\_\_\_ of my \_\_\_\_\_ how \_\_\_\_\_ I find \_\_\_\_\_ option?

\_\_\_\_\_ my \_\_\_\_\_ isn't \_\_\_\_\_ are \_\_\_\_\_ alternatives.

In case the treatment \_\_\_\_\_ of \_\_\_\_\_ how \_\_\_\_\_ I \_\_\_\_\_ option?

\_\_\_\_\_ if \_\_\_\_\_ medication \_\_\_\_\_ therapy gets \_\_\_\_\_?

\_\_\_\_\_ tell me \_\_\_\_\_ deal \_\_\_\_\_ uncovered treatment and \_\_\_\_\_?

I \_\_\_\_\_ know if my insurance \_\_\_\_\_ some \_\_\_\_\_.

What \_\_\_\_\_ excludes certain \_\_\_\_\_?

\_\_\_\_\_ there any other \_\_\_\_\_ if my \_\_\_\_\_ covered?

I don't \_\_\_\_\_ can \_\_\_\_\_ anything \_\_\_\_\_ plan doesn't cover \_\_\_\_\_ treatments.

Can \_\_\_\_\_ action \_\_\_\_\_ plan \_\_\_\_\_ cover treatments?

\_\_\_\_\_ pay \_\_\_\_\_ specific treatments, what action can \_\_\_\_\_?

How should we \_\_\_\_\_ with \_\_\_\_\_ medications \_\_\_\_\_?

\_\_\_\_\_ my \_\_\_\_\_ me on \_\_\_\_\_ are there \_\_\_\_\_ choices?

Do \_\_\_\_\_ know \_\_\_\_\_ I \_\_\_\_\_ if \_\_\_\_\_ plan doesn't cover \_\_\_\_\_ treatments \_\_\_\_\_?

\_\_\_\_\_ am \_\_\_\_\_ if \_\_\_\_\_ are any \_\_\_\_\_ plan doesn't extend \_\_\_\_\_.

If my \_\_\_\_\_ excludes drugs, \_\_\_\_\_?

\_\_\_\_\_ should \_\_\_\_\_ do \_\_\_\_\_ thing isn't covered by \_\_\_\_\_?

What \_\_\_\_\_ can I \_\_\_\_\_ my plan \_\_\_\_\_ certain \_\_\_\_\_?

\_\_\_\_\_ any \_\_\_\_\_ to get my treatment \_\_\_\_\_ medicine \_\_\_\_\_?

What \_\_\_\_\_ should \_\_\_\_\_ take if my \_\_\_\_\_ doesn't cover \_\_\_\_\_?

Can you \_\_\_\_\_ I can \_\_\_\_\_ plan \_\_\_\_\_ cover some treatments.

If some important procedures \_\_\_\_\_ my \_\_\_\_\_ coverage, \_\_\_\_\_ any choice?

Do I \_\_\_\_\_ my plan \_\_\_\_\_ certain treatments?

\_\_\_\_\_ my plan \_\_\_\_\_ include particular \_\_\_\_\_ other options \_\_\_\_\_ there?

If \_\_\_\_\_ are \_\_\_\_\_ by \_\_\_\_\_ alternatives are there?

\_\_\_\_\_ my \_\_\_\_\_ provide coverage for \_\_\_\_\_ medical \_\_\_\_\_ are there \_\_\_\_\_ alternatives?

\_\_\_\_\_ plan \_\_\_\_\_ for treatments, what \_\_\_\_\_ I do?

What \_\_\_\_\_ medical services that are not \_\_\_\_\_ by \_\_\_\_\_?

What can be done \_\_\_\_\_ won't \_\_\_\_\_ treatments.

What can be \_\_\_\_\_ if \_\_\_\_\_ current plan \_\_\_\_\_ medical \_\_\_\_\_?

\_\_\_\_\_ insurance fails to cover some treatments?

\_\_\_\_\_ can I do if it's \_\_\_\_\_ covered \_\_\_\_\_?

\_\_\_\_\_ isn't \_\_\_\_\_ what \_\_\_\_\_ alternatives?

\_\_\_\_\_ be \_\_\_\_\_ if the \_\_\_\_\_ doesn't cover \_\_\_\_\_ care?

What should \_\_\_\_\_ my medical \_\_\_\_\_ excludes \_\_\_\_\_ prescriptions \_\_\_\_\_ procedures?

When \_\_\_\_\_ not \_\_\_\_\_ coverage to \_\_\_\_\_ medical \_\_\_\_\_ there \_\_\_\_\_ alternatives.

\_\_\_\_\_ should \_\_\_\_\_ if my \_\_\_\_\_ cover certain things?

What do I \_\_\_\_\_ to \_\_\_\_\_ if it's \_\_\_\_\_ plan?

\_\_\_\_\_ happen \_\_\_\_\_ treatment \_\_\_\_\_ covered?

Do I have other options \_\_\_\_\_ insurance \_\_\_\_\_?

\_\_\_\_\_ certain \_\_\_\_\_ denied by the \_\_\_\_\_ are \_\_\_\_\_ other \_\_\_\_\_?  
 Are \_\_\_\_\_ options \_\_\_\_\_ insurance cover \_\_\_\_\_ drugs?  
 \_\_\_\_\_ there anything I \_\_\_\_\_ do if my \_\_\_\_\_ excludes \_\_\_\_\_?  
 When \_\_\_\_\_ ditches \_\_\_\_\_ happens?  
 \_\_\_\_\_ do if \_\_\_\_\_ plan doesn't \_\_\_\_\_ my drugs?  
 \_\_\_\_\_ considered when my \_\_\_\_\_ excludes \_\_\_\_\_?  
 If \_\_\_\_\_ cover some \_\_\_\_\_ are \_\_\_\_\_ alternatives?  
 What are \_\_\_\_\_ my plan won't \_\_\_\_\_ treatments or \_\_\_\_\_?  
 \_\_\_\_\_ can \_\_\_\_\_ deal \_\_\_\_\_ uncovered treatments \_\_\_\_\_?  
 \_\_\_\_\_ if treatment isn't covered?  
 If this \_\_\_\_\_ treatments, what \_\_\_\_\_ do?  
 Need \_\_\_\_\_ when the \_\_\_\_\_ cover \_\_\_\_\_?  
 What can \_\_\_\_\_ done \_\_\_\_\_ medical \_\_\_\_\_ not \_\_\_\_\_ my \_\_\_\_\_?  
 Do you \_\_\_\_\_ when \_\_\_\_\_ insurance \_\_\_\_\_ me \_\_\_\_\_ treatment?  
 \_\_\_\_\_ possible to get \_\_\_\_\_ choices when \_\_\_\_\_ stiffes me \_\_\_\_\_?  
 If my \_\_\_\_\_ for specific treatments, \_\_\_\_\_ out \_\_\_\_\_ luck?  
 There are certain \_\_\_\_\_ aren't \_\_\_\_\_ my \_\_\_\_\_ plan.  
 if my plan \_\_\_\_\_ some \_\_\_\_\_ can \_\_\_\_\_ do?  
 \_\_\_\_\_ does not \_\_\_\_\_ certain medical \_\_\_\_\_ are there any \_\_\_\_\_?  
 \_\_\_\_\_ a \_\_\_\_\_ what's protected \_\_\_\_\_ your scheme, will \_\_\_\_\_ be backup measures?  
 What \_\_\_\_\_ can be \_\_\_\_\_ if \_\_\_\_\_ by our plan?  
 I don't know \_\_\_\_\_ plan will \_\_\_\_\_ treatments \_\_\_\_\_.  
 \_\_\_\_\_ treatments are denied \_\_\_\_\_ are \_\_\_\_\_?  
 \_\_\_\_\_ actions can \_\_\_\_\_ take \_\_\_\_\_ plan excludes \_\_\_\_\_ treatments?  
 \_\_\_\_\_ plan excludes treatments, what \_\_\_\_\_ I \_\_\_\_\_?  
 \_\_\_\_\_ coverage \_\_\_\_\_ certain medicine, are there \_\_\_\_\_?  
 \_\_\_\_\_ do \_\_\_\_\_ my plan excludes \_\_\_\_\_ drugs?  
 If \_\_\_\_\_ treatments, what are \_\_\_\_\_ options?  
 I want \_\_\_\_\_ know \_\_\_\_\_ I \_\_\_\_\_ do if my \_\_\_\_\_ for \_\_\_\_\_.  
 \_\_\_\_\_ needs \_\_\_\_\_ not \_\_\_\_\_ by my plan, \_\_\_\_\_ other options \_\_\_\_\_?  
 \_\_\_\_\_ doesn't cover certain \_\_\_\_\_ options how \_\_\_\_\_ I \_\_\_\_\_?  
 \_\_\_\_\_ I \_\_\_\_\_ this plan doesn't \_\_\_\_\_ treatments?  
 \_\_\_\_\_ the \_\_\_\_\_ not covered, \_\_\_\_\_ there any alternatives?  
 Is \_\_\_\_\_ other options \_\_\_\_\_ my insurance doesn't \_\_\_\_\_.  
 \_\_\_\_\_ be \_\_\_\_\_ if the \_\_\_\_\_ is \_\_\_\_\_ covered by our \_\_\_\_\_ plan?  
 If my \_\_\_\_\_ what options do \_\_\_\_\_ have?  
 What \_\_\_\_\_ be done about specific \_\_\_\_\_ included in \_\_\_\_\_?  
 When \_\_\_\_\_ cover specific \_\_\_\_\_ can be \_\_\_\_\_?  
 If \_\_\_\_\_ is denied \_\_\_\_\_ there \_\_\_\_\_ recourse?  
 When treatment \_\_\_\_\_ medicine is \_\_\_\_\_ is \_\_\_\_\_ recourse?  
 What alternative \_\_\_\_\_ can \_\_\_\_\_ taken if specific \_\_\_\_\_ not \_\_\_\_\_ by \_\_\_\_\_ existing \_\_\_\_\_?  
 I \_\_\_\_\_ know \_\_\_\_\_ if my plan \_\_\_\_\_ cover some treatments.  
 \_\_\_\_\_ the options \_\_\_\_\_ my medicare plan excludes \_\_\_\_\_?  
 When \_\_\_\_\_ plan ditches \_\_\_\_\_ or drugs, what \_\_\_\_\_?  
 \_\_\_\_\_ there any other \_\_\_\_\_ case my insurance \_\_\_\_\_ my \_\_\_\_\_?  
 \_\_\_\_\_ isn't \_\_\_\_\_ medicine \_\_\_\_\_ scope of what's \_\_\_\_\_ on your scheme, \_\_\_\_\_ backup \_\_\_\_\_?  
 \_\_\_\_\_ do when \_\_\_\_\_ excludes treatments?  
 My plan \_\_\_\_\_ certain \_\_\_\_\_ what do \_\_\_\_\_?  
 When my plan doesn't give coverage \_\_\_\_\_ certain \_\_\_\_\_ are \_\_\_\_\_?  
 \_\_\_\_\_ I out \_\_\_\_\_ luck \_\_\_\_\_ plan \_\_\_\_\_ specific treatments or \_\_\_\_\_?

\_\_\_\_\_ my \_\_\_\_\_ doesn't \_\_\_\_\_ measures, are there any \_\_\_\_\_?

\_\_\_\_\_ are \_\_\_\_\_ if my medicare plan \_\_\_\_\_ include \_\_\_\_\_?

\_\_\_\_\_ there if \_\_\_\_\_ plan doesn't \_\_\_\_\_ some treatments?

There are \_\_\_\_\_ treatments \_\_\_\_\_ aren't covered \_\_\_\_\_ my \_\_\_\_\_.

\_\_\_\_\_ I do if my \_\_\_\_\_ covering some \_\_\_\_\_?

Need help when the \_\_\_\_\_ coverage \_\_\_\_\_?

\_\_\_\_\_ there \_\_\_\_\_ can do \_\_\_\_\_ stiffs me on treatment?

Is \_\_\_\_\_ any \_\_\_\_\_ case my \_\_\_\_\_ doesn't include certain \_\_\_\_\_ or \_\_\_\_\_?

When \_\_\_\_\_ excludes \_\_\_\_\_ medications, what \_\_\_\_\_ is \_\_\_\_\_?

\_\_\_\_\_ can \_\_\_\_\_ do \_\_\_\_\_ get \_\_\_\_\_ medical \_\_\_\_\_ back on \_\_\_\_\_ policy?

If \_\_\_\_\_ plan doesn't \_\_\_\_\_ some treatment, can \_\_\_\_\_?

Can \_\_\_\_\_ something \_\_\_\_\_ plan doesn't \_\_\_\_\_ some treatment?

If \_\_\_\_\_ plan \_\_\_\_\_ specific treatments, \_\_\_\_\_ I do?

How \_\_\_\_\_ I find \_\_\_\_\_ option \_\_\_\_\_ the treatment \_\_\_\_\_ my \_\_\_\_\_?

If my \_\_\_\_\_ certain medical \_\_\_\_\_ what \_\_\_\_\_ do?

\_\_\_\_\_ a \_\_\_\_\_ that \_\_\_\_\_ of my \_\_\_\_\_ how \_\_\_\_\_ I find another one?

In the event \_\_\_\_\_ insurance doesn't cover some \_\_\_\_\_?

\_\_\_\_\_ there \_\_\_\_\_ do if my coverage doesn't \_\_\_\_\_ medical \_\_\_\_\_?

\_\_\_\_\_ my \_\_\_\_\_ if my plan \_\_\_\_\_ therapies?

How \_\_\_\_\_ find other options \_\_\_\_\_ there \_\_\_\_\_ treatment \_\_\_\_\_ isn't \_\_\_\_\_ plan?

What can \_\_\_\_\_ do if \_\_\_\_\_ plan \_\_\_\_\_ the \_\_\_\_\_ need?

I \_\_\_\_\_ if my \_\_\_\_\_ will \_\_\_\_\_ treatments.

What \_\_\_\_\_ can \_\_\_\_\_ taken if our existing \_\_\_\_\_ doesn't \_\_\_\_\_?

\_\_\_\_\_ some \_\_\_\_\_ procedures aren't \_\_\_\_\_ in my insurance \_\_\_\_\_ I \_\_\_\_\_ choice?

\_\_\_\_\_ should I do if my \_\_\_\_\_ specific \_\_\_\_\_?

\_\_\_\_\_ should \_\_\_\_\_ proceed \_\_\_\_\_ plan does not \_\_\_\_\_ some medical \_\_\_\_\_?

\_\_\_\_\_ if my insurance \_\_\_\_\_ will \_\_\_\_\_ certain \_\_\_\_\_.

What \_\_\_\_\_ taken if \_\_\_\_\_ does \_\_\_\_\_ cover specific medical \_\_\_\_\_?

Is \_\_\_\_\_ remedy for \_\_\_\_\_ coverage?

What should I do \_\_\_\_\_ doesn't pay \_\_\_\_\_?

What \_\_\_\_\_ if \_\_\_\_\_ plan doesn't cover \_\_\_\_\_ treatment?

What are my \_\_\_\_\_ my plan won't \_\_\_\_\_ some \_\_\_\_\_?

\_\_\_\_\_ would like \_\_\_\_\_ what I can do if my \_\_\_\_\_ treatments.

Can \_\_\_\_\_ what I \_\_\_\_\_ if my plan \_\_\_\_\_ pay for \_\_\_\_\_?

\_\_\_\_\_ able to \_\_\_\_\_ if my \_\_\_\_\_ does not \_\_\_\_\_ certain \_\_\_\_\_?

What can \_\_\_\_\_ done \_\_\_\_\_ medical \_\_\_\_\_ is not \_\_\_\_\_ current \_\_\_\_\_?

\_\_\_\_\_ treatment is \_\_\_\_\_ coverage is \_\_\_\_\_ recourse?

Is there a way to \_\_\_\_\_ it \_\_\_\_\_ denied \_\_\_\_\_?

\_\_\_\_\_ plan \_\_\_\_\_ cover certain \_\_\_\_\_ what are \_\_\_\_\_ alternatives?

\_\_\_\_\_ covered, \_\_\_\_\_ are the alternatives?

\_\_\_\_\_ I \_\_\_\_\_ if this \_\_\_\_\_ won't \_\_\_\_\_ for \_\_\_\_\_ treatments?

\_\_\_\_\_ do something if my \_\_\_\_\_ for \_\_\_\_\_ treatments?

What \_\_\_\_\_ the \_\_\_\_\_ treatment \_\_\_\_\_ the plan won't \_\_\_\_\_?

\_\_\_\_\_ and medication \_\_\_\_\_ now what?

What \_\_\_\_\_ when \_\_\_\_\_ coverage is not adequate \_\_\_\_\_ treatments?

\_\_\_\_\_ can be \_\_\_\_\_ services that are \_\_\_\_\_ in my \_\_\_\_\_?

What \_\_\_\_\_ can \_\_\_\_\_ my medicare plan excludes \_\_\_\_\_?

\_\_\_\_\_ do \_\_\_\_\_ plan excludes treatments or drugs?

What can \_\_\_\_\_ done \_\_\_\_\_ the medical \_\_\_\_\_ policy?

\_\_\_\_\_ there any alternatives \_\_\_\_\_ excludes certain \_\_\_\_\_?

\_\_\_\_\_ are my \_\_\_\_\_ if my \_\_\_\_\_ certain treatments?  
 What \_\_\_\_\_ do if \_\_\_\_\_ include any treatments?  
 \_\_\_\_\_ there \_\_\_\_\_ option \_\_\_\_\_ treatments are denied by \_\_\_\_\_?  
 \_\_\_\_\_ can I use if plan \_\_\_\_\_?  
 What can \_\_\_\_\_ my plan \_\_\_\_\_?  
 What \_\_\_\_\_ my \_\_\_\_\_ if I \_\_\_\_\_ have \_\_\_\_\_ treatments?  
 \_\_\_\_\_ be \_\_\_\_\_ when \_\_\_\_\_ doesn't \_\_\_\_\_ for certain treatments?  
 \_\_\_\_\_ can \_\_\_\_\_ done with \_\_\_\_\_ services \_\_\_\_\_ are not \_\_\_\_\_ policy.  
 If this plan \_\_\_\_\_ cover \_\_\_\_\_ what \_\_\_\_\_ I \_\_\_\_\_?  
 \_\_\_\_\_ I do \_\_\_\_\_ I can't get \_\_\_\_\_ for \_\_\_\_\_?  
 What \_\_\_\_\_ some treatment \_\_\_\_\_ covered?  
 \_\_\_\_\_ case my insurance does \_\_\_\_\_ cover \_\_\_\_\_ of \_\_\_\_\_ there \_\_\_\_\_ options?  
 \_\_\_\_\_ do \_\_\_\_\_ do \_\_\_\_\_ our \_\_\_\_\_ doesn't cover \_\_\_\_\_ medical \_\_\_\_\_?  
 What are \_\_\_\_\_ if my \_\_\_\_\_ cover \_\_\_\_\_ things?  
 \_\_\_\_\_ exist for patients \_\_\_\_\_ have prescriptions that \_\_\_\_\_ not approved \_\_\_\_\_?  
 What can I \_\_\_\_\_ if \_\_\_\_\_ coverage doesn't \_\_\_\_\_?  
 \_\_\_\_\_ else come under \_\_\_\_\_ if \_\_\_\_\_ excludes \_\_\_\_\_ medications?  
 Can \_\_\_\_\_ me \_\_\_\_\_ can \_\_\_\_\_ if my plan does \_\_\_\_\_ something?  
 Is there \_\_\_\_\_ else \_\_\_\_\_ comes \_\_\_\_\_ consideration \_\_\_\_\_ plan \_\_\_\_\_ certain \_\_\_\_\_?  
 \_\_\_\_\_ some important \_\_\_\_\_ not \_\_\_\_\_ in \_\_\_\_\_ insurance coverage, \_\_\_\_\_ be any \_\_\_\_\_?  
 What \_\_\_\_\_ I \_\_\_\_\_ if treatments \_\_\_\_\_?  
 \_\_\_\_\_ would happen \_\_\_\_\_ doesn't cover \_\_\_\_\_ care?  
 What \_\_\_\_\_ plan \_\_\_\_\_ treatments?  
 What \_\_\_\_\_ there isn't coverage for \_\_\_\_\_ therapies?  
 If \_\_\_\_\_ coverage \_\_\_\_\_ medical procedures \_\_\_\_\_ what recourse do \_\_\_\_\_ have?  
 \_\_\_\_\_ other options if \_\_\_\_\_ denied by \_\_\_\_\_?  
 When coverage \_\_\_\_\_ include \_\_\_\_\_ medicine, \_\_\_\_\_?  
 \_\_\_\_\_ are \_\_\_\_\_ options \_\_\_\_\_ my plan \_\_\_\_\_ for some \_\_\_\_\_?  
 What \_\_\_\_\_ I \_\_\_\_\_ if my \_\_\_\_\_ or drugs?  
 \_\_\_\_\_ if \_\_\_\_\_ and medication isn't \_\_\_\_\_?  
 Is there any \_\_\_\_\_ in \_\_\_\_\_ my \_\_\_\_\_ covered?  
 What choices \_\_\_\_\_ have \_\_\_\_\_ include specific treatments?  
 \_\_\_\_\_ there be other \_\_\_\_\_ if \_\_\_\_\_ plan \_\_\_\_\_ cover \_\_\_\_\_ needs?  
 What \_\_\_\_\_ alternatives \_\_\_\_\_ my plan \_\_\_\_\_ not cover \_\_\_\_\_ medications?  
 If \_\_\_\_\_ does not \_\_\_\_\_ things, \_\_\_\_\_ should I \_\_\_\_\_?  
 What \_\_\_\_\_ I do \_\_\_\_\_ won't \_\_\_\_\_ this.  
 \_\_\_\_\_ there another \_\_\_\_\_ if certain \_\_\_\_\_ are \_\_\_\_\_ insurers?  
 What's \_\_\_\_\_ if my \_\_\_\_\_ doesn't \_\_\_\_\_?  
 Can I \_\_\_\_\_ doesn't pay for treatment?  
 \_\_\_\_\_ you \_\_\_\_\_ me what alternatives are \_\_\_\_\_ treatments?  
 \_\_\_\_\_ options will \_\_\_\_\_ have \_\_\_\_\_ my \_\_\_\_\_ cover \_\_\_\_\_ treatments?  
 \_\_\_\_\_ my plan \_\_\_\_\_ what should \_\_\_\_\_?  
 When my \_\_\_\_\_ doesn't \_\_\_\_\_ coverage \_\_\_\_\_ measures, are \_\_\_\_\_ other \_\_\_\_\_?  
 What \_\_\_\_\_ I take if \_\_\_\_\_ plan \_\_\_\_\_ cover \_\_\_\_\_ procedures?  
 \_\_\_\_\_ you \_\_\_\_\_ the \_\_\_\_\_ lacks \_\_\_\_\_ for prescriptions?  
 \_\_\_\_\_ happens if \_\_\_\_\_ cover medicine?  
 \_\_\_\_\_ can we do if our \_\_\_\_\_ care?  
 \_\_\_\_\_ there an alternative \_\_\_\_\_ treatment \_\_\_\_\_ medicine isn't \_\_\_\_\_?  
 Can you tell \_\_\_\_\_ what \_\_\_\_\_ do \_\_\_\_\_ my \_\_\_\_\_ treatments?  
 \_\_\_\_\_ do \_\_\_\_\_ if my plan excludes \_\_\_\_\_?

\_\_\_\_ specific medical needs \_\_\_\_ covered by \_\_\_\_ other options \_\_\_\_?  
 \_\_\_\_ can we do \_\_\_\_ our plan \_\_\_\_ specific \_\_\_\_ care?  
 What \_\_\_\_ do \_\_\_\_ have if my \_\_\_\_ treatments?  
 What \_\_\_\_ do if \_\_\_\_ coverage \_\_\_\_ cover my \_\_\_\_?  
 \_\_\_\_ should \_\_\_\_ if my \_\_\_\_ will not \_\_\_\_ specific \_\_\_\_?  
 \_\_\_\_ do \_\_\_\_ there is not coverage \_\_\_\_ treatments?  
 \_\_\_\_ are my \_\_\_\_ if \_\_\_\_ won't cover some \_\_\_\_?  
 Specific \_\_\_\_ excluded \_\_\_\_ my policy  
 If my plan won't \_\_\_\_ my \_\_\_\_ options?  
 If \_\_\_\_ plan won't cover \_\_\_\_ can \_\_\_\_ do?  
 \_\_\_\_ you \_\_\_\_ what I \_\_\_\_ do if my \_\_\_\_ I need?  
 \_\_\_\_ alternatives \_\_\_\_ if \_\_\_\_ treatments are not \_\_\_\_?  
 \_\_\_\_ can be \_\_\_\_ if medical \_\_\_\_ is \_\_\_\_ current plan.  
 If that \_\_\_\_ in the plan, \_\_\_\_ do?  
 \_\_\_\_ need to know \_\_\_\_ can do \_\_\_\_ doesn't cover the \_\_\_\_.  
 If my \_\_\_\_ does not cover \_\_\_\_ something?  
 \_\_\_\_ if certain \_\_\_\_ are not \_\_\_\_ by \_\_\_\_.  
 \_\_\_\_ can be done \_\_\_\_ medical \_\_\_\_ aren't \_\_\_\_ my policy?  
 If \_\_\_\_ not \_\_\_\_ in my \_\_\_\_ coverage, \_\_\_\_ there \_\_\_\_ any \_\_\_\_ choices?  
 \_\_\_\_ doesn't cover specific treatments \_\_\_\_ medication, \_\_\_\_ I do?  
 When coverage doesn't include \_\_\_\_ medicine, \_\_\_\_?  
 What can I do \_\_\_\_ this stuff?  
 What recourse \_\_\_\_ if my plan \_\_\_\_ treatments?  
 When my plan \_\_\_\_ cover \_\_\_\_ needs, are \_\_\_\_?  
 What \_\_\_\_ do \_\_\_\_ my \_\_\_\_ scheme \_\_\_\_ cover \_\_\_\_ and procedures?  
 \_\_\_\_ recourse when treatment is denied \_\_\_\_?  
 \_\_\_\_ actions \_\_\_\_ taken when \_\_\_\_ doesn't \_\_\_\_ for treatments?  
 If my \_\_\_\_ cover a certain \_\_\_\_ option, \_\_\_\_ should \_\_\_\_?  
 \_\_\_\_ there \_\_\_\_ other option when my \_\_\_\_ on \_\_\_\_?  
 \_\_\_\_ no \_\_\_\_ for \_\_\_\_ medication?  
 If \_\_\_\_ doesn't cover some \_\_\_\_ treatments, \_\_\_\_ are \_\_\_\_ options?  
 If \_\_\_\_ treatment is \_\_\_\_ what \_\_\_\_ are \_\_\_\_?  
 \_\_\_\_ my plan doesn't cover \_\_\_\_ how \_\_\_\_ I \_\_\_\_?  
 If my \_\_\_\_ excludes specific therapies, \_\_\_\_ options \_\_\_\_?  
 \_\_\_\_ I do when there \_\_\_\_ no \_\_\_\_ treatments?  
 \_\_\_\_ a medicine isn't \_\_\_\_ of the plan, \_\_\_\_ there \_\_\_\_?  
 \_\_\_\_ my \_\_\_\_ do I do?  
 \_\_\_\_ the \_\_\_\_ specific medical \_\_\_\_ not covered by \_\_\_\_ current plan?  
 There are \_\_\_\_ if my \_\_\_\_ treatments.  
 When my insurance \_\_\_\_ me \_\_\_\_ payments, \_\_\_\_ there \_\_\_\_?  
 Is there \_\_\_\_ alternatives that \_\_\_\_ covered \_\_\_\_ my \_\_\_\_?  
 Is there \_\_\_\_ do \_\_\_\_ insurance stiffs \_\_\_\_ treatment?  
 I \_\_\_\_ to know what I \_\_\_\_ plan won't \_\_\_\_ certain treatments \_\_\_\_.  
 Am I out of \_\_\_\_ my treatments?  
 What \_\_\_\_ do \_\_\_\_ if \_\_\_\_ plan \_\_\_\_ cover a \_\_\_\_ treatment?  
 \_\_\_\_ I explore other \_\_\_\_ if \_\_\_\_ treatment \_\_\_\_ outside of my plan?  
 Now \_\_\_\_ and \_\_\_\_ included?  
 What \_\_\_\_ I \_\_\_\_ if my \_\_\_\_ does not \_\_\_\_?  
 Is it \_\_\_\_ plan \_\_\_\_ treatments?  
 If \_\_\_\_ treatment or medicine \_\_\_\_ covered, \_\_\_\_ any \_\_\_\_?

\_\_\_\_\_ stiff \_\_\_\_\_ on \_\_\_\_\_ are there other choices?

I \_\_\_\_\_ know \_\_\_\_\_ to deal with \_\_\_\_\_ and \_\_\_\_\_.

\_\_\_\_\_ treatment \_\_\_\_\_ medication \_\_\_\_\_ included?

There are alternatives \_\_\_\_\_ isn't \_\_\_\_\_.

\_\_\_\_\_ be \_\_\_\_\_ if treatment isn't \_\_\_\_\_?

\_\_\_\_\_ I proceed if my plan \_\_\_\_\_ certain \_\_\_\_\_?

\_\_\_\_\_ actions can \_\_\_\_\_ taken \_\_\_\_\_ will not pay \_\_\_\_\_ specific \_\_\_\_\_?

\_\_\_\_\_ insurance \_\_\_\_\_ on certain \_\_\_\_\_?

Is there anything you can \_\_\_\_\_ if \_\_\_\_\_?

\_\_\_\_\_ I out of \_\_\_\_\_ if \_\_\_\_\_ plan \_\_\_\_\_ treatments?

\_\_\_\_\_ my plan doesn't cover some \_\_\_\_\_ action?

What \_\_\_\_\_ exist if \_\_\_\_\_ drugs?

What should \_\_\_\_\_ do \_\_\_\_\_ plan \_\_\_\_\_ treatments?

What \_\_\_\_\_ I \_\_\_\_\_ my medical \_\_\_\_\_ doesn't \_\_\_\_\_ certain \_\_\_\_\_ and \_\_\_\_\_?

\_\_\_\_\_ possible \_\_\_\_\_ do something if \_\_\_\_\_ plan \_\_\_\_\_ treatments?

\_\_\_\_\_ wonder if \_\_\_\_\_ do \_\_\_\_\_ if my \_\_\_\_\_ doesn't \_\_\_\_\_ some \_\_\_\_\_.

When \_\_\_\_\_ plan doesn't cover certain \_\_\_\_\_ is there \_\_\_\_\_?

\_\_\_\_\_ don't \_\_\_\_\_ what \_\_\_\_\_ have if my plan \_\_\_\_\_.

What \_\_\_\_\_ to \_\_\_\_\_ if \_\_\_\_\_ plan doesn't \_\_\_\_\_ certain treatments?

\_\_\_\_\_ are \_\_\_\_\_ if my \_\_\_\_\_ won't \_\_\_\_\_ for \_\_\_\_\_ or medications?

What \_\_\_\_\_ I do if \_\_\_\_\_ for treatments?

\_\_\_\_\_ is \_\_\_\_\_ in the \_\_\_\_\_ what do I do?

What \_\_\_\_\_ I \_\_\_\_\_ my \_\_\_\_\_ treatments?

\_\_\_\_\_ the next step if my plan \_\_\_\_\_?

\_\_\_\_\_ tell me what I \_\_\_\_\_ my plan does not \_\_\_\_\_?

\_\_\_\_\_ a medicine isn't within the \_\_\_\_\_ protected \_\_\_\_\_ do \_\_\_\_\_ backup measures?

\_\_\_\_\_ can be \_\_\_\_\_ about medical services \_\_\_\_\_ my \_\_\_\_\_.

Is \_\_\_\_\_ my \_\_\_\_\_ stiff \_\_\_\_\_ me on treatment?

If my \_\_\_\_\_ pay \_\_\_\_\_ or drugs, what \_\_\_\_\_ I \_\_\_\_\_?

Some treatments aren't \_\_\_\_\_.

Is my plan out \_\_\_\_\_ doesn't cover \_\_\_\_\_?

\_\_\_\_\_ doesn't cover specific treatments, \_\_\_\_\_ out of luck?

What \_\_\_\_\_ I \_\_\_\_\_ I don't \_\_\_\_\_ coverage \_\_\_\_\_ need?

What do I \_\_\_\_\_ doesn't \_\_\_\_\_ my medication?

What choices \_\_\_\_\_ if \_\_\_\_\_ plan \_\_\_\_\_ cover certain \_\_\_\_\_?

\_\_\_\_\_ if treatment \_\_\_\_\_ included?

\_\_\_\_\_ my plan \_\_\_\_\_ include any particular \_\_\_\_\_ therapies, \_\_\_\_\_ other \_\_\_\_\_ are \_\_\_\_\_?

What are \_\_\_\_\_ my plan \_\_\_\_\_ cover \_\_\_\_\_?

\_\_\_\_\_ do I have if \_\_\_\_\_ doesn't \_\_\_\_\_ something?

If \_\_\_\_\_ isn't covered \_\_\_\_\_ the plan, \_\_\_\_\_ am \_\_\_\_\_ going \_\_\_\_\_?

\_\_\_\_\_ my plan \_\_\_\_\_ cover \_\_\_\_\_ services?

\_\_\_\_\_ know what to \_\_\_\_\_ with \_\_\_\_\_ treatment or \_\_\_\_\_.

\_\_\_\_\_ alternatives \_\_\_\_\_ treatments not covered \_\_\_\_\_ plan?

What can be \_\_\_\_\_ for some treatments?

\_\_\_\_\_ actions should \_\_\_\_\_ if \_\_\_\_\_ medical scheme doesn't cover \_\_\_\_\_?

If \_\_\_\_\_ medicine is not \_\_\_\_\_ the scope \_\_\_\_\_ are \_\_\_\_\_ measures?

\_\_\_\_\_ certain medical \_\_\_\_\_ excluded from my policy?

\_\_\_\_\_ steps \_\_\_\_\_ I take if \_\_\_\_\_ medical \_\_\_\_\_ cover \_\_\_\_\_?

\_\_\_\_\_ should I \_\_\_\_\_ scheme does not \_\_\_\_\_ prescriptions and \_\_\_\_\_?

What steps should I \_\_\_\_\_ doesn't \_\_\_\_\_ certain \_\_\_\_\_ and \_\_\_\_\_?

\_\_\_\_\_ I do if \_\_\_\_\_ not cover \_\_\_\_\_ treatments?  
 When \_\_\_\_\_ doesn't cover specific \_\_\_\_\_ needs, \_\_\_\_\_ other options \_\_\_\_\_?  
 When treatment or medicine \_\_\_\_\_ is \_\_\_\_\_?  
 \_\_\_\_\_ can \_\_\_\_\_ find other options if \_\_\_\_\_ falls \_\_\_\_\_ plan?  
 What I can \_\_\_\_\_ plan \_\_\_\_\_ some treatments?  
 If \_\_\_\_\_ are not \_\_\_\_\_ in my insurance \_\_\_\_\_ have any \_\_\_\_\_?  
 \_\_\_\_\_ isn't covered, \_\_\_\_\_ alternatives are \_\_\_\_\_?  
 \_\_\_\_\_ can be done about services \_\_\_\_\_?  
 What's \_\_\_\_\_ if \_\_\_\_\_ plan doesn't \_\_\_\_\_?  
 What alternatives can \_\_\_\_\_ if \_\_\_\_\_ plan \_\_\_\_\_ drugs \_\_\_\_\_?  
 \_\_\_\_\_ options if my plan doesn't \_\_\_\_\_ the \_\_\_\_\_ need?  
 What \_\_\_\_\_ be the \_\_\_\_\_ step if my plan \_\_\_\_\_?  
 Suggestions if \_\_\_\_\_ in my insurance \_\_\_\_\_.  
 If \_\_\_\_\_ denies coverage \_\_\_\_\_ I \_\_\_\_\_?  
 Treatment \_\_\_\_\_ not \_\_\_\_\_ now what?  
 \_\_\_\_\_ should I do \_\_\_\_\_ help?  
 Is \_\_\_\_\_ considered if my \_\_\_\_\_ certain \_\_\_\_\_?  
 \_\_\_\_\_ are \_\_\_\_\_ going \_\_\_\_\_ do \_\_\_\_\_ my \_\_\_\_\_ doesn't cover certain \_\_\_\_\_?  
 What happens \_\_\_\_\_ plan \_\_\_\_\_ not cover \_\_\_\_\_ medical \_\_\_\_\_?  
 What options \_\_\_\_\_ I have if \_\_\_\_\_ doesn't \_\_\_\_\_?  
 I want \_\_\_\_\_ know what I can do \_\_\_\_\_.  
 What \_\_\_\_\_ since \_\_\_\_\_ plan \_\_\_\_\_ cover this?  
 \_\_\_\_\_ won't \_\_\_\_\_ treatments, what actions \_\_\_\_\_ be taken.  
 \_\_\_\_\_ steps \_\_\_\_\_ if \_\_\_\_\_ medical scheme \_\_\_\_\_ cover procedures?  
 \_\_\_\_\_ is \_\_\_\_\_ treatment \_\_\_\_\_ the scope of \_\_\_\_\_ how \_\_\_\_\_ I \_\_\_\_\_ alternatives?  
 \_\_\_\_\_ when \_\_\_\_\_ plan excludes some medications?  
 I wonder \_\_\_\_\_ specific treatments.  
 What should \_\_\_\_\_ do if \_\_\_\_\_?  
 \_\_\_\_\_ there \_\_\_\_\_ I \_\_\_\_\_ do if my plan \_\_\_\_\_?  
 \_\_\_\_\_ there any other \_\_\_\_\_ insurance \_\_\_\_\_ covering treatments?  
 \_\_\_\_\_ any options \_\_\_\_\_ coverage doesn't include \_\_\_\_\_?  
 What could \_\_\_\_\_ if our \_\_\_\_\_ plan does \_\_\_\_\_ medical \_\_\_\_\_?  
 \_\_\_\_\_ my plan doesn't cover specific \_\_\_\_\_ do?  
 What \_\_\_\_\_ I do \_\_\_\_\_ excludes certain \_\_\_\_\_?  
 What can \_\_\_\_\_ not covered \_\_\_\_\_ my plan?  
 What can \_\_\_\_\_ this \_\_\_\_\_ doesn't \_\_\_\_\_ something?  
 \_\_\_\_\_ my \_\_\_\_\_ excludes some treatments, what recourse \_\_\_\_\_?  
 If \_\_\_\_\_ medicine \_\_\_\_\_ the \_\_\_\_\_ your scheme, \_\_\_\_\_ there backup \_\_\_\_\_?  
 There \_\_\_\_\_ in case my \_\_\_\_\_ covered.  
 \_\_\_\_\_ options \_\_\_\_\_ I got if \_\_\_\_\_ plan \_\_\_\_\_?  
 \_\_\_\_\_ can \_\_\_\_\_ do \_\_\_\_\_ plan doesn't \_\_\_\_\_ things?  
 \_\_\_\_\_ options do I have \_\_\_\_\_ my \_\_\_\_\_ cover \_\_\_\_\_ medication?  
 \_\_\_\_\_ are my \_\_\_\_\_ plan doesn't cover some \_\_\_\_\_?  
 What do \_\_\_\_\_ do \_\_\_\_\_ my \_\_\_\_\_ covering \_\_\_\_\_?  
 If my plan \_\_\_\_\_ cover \_\_\_\_\_ treatments or drugs, \_\_\_\_\_?  
 \_\_\_\_\_ my \_\_\_\_\_ cover \_\_\_\_\_ I can do?  
 \_\_\_\_\_ you tell \_\_\_\_\_ what \_\_\_\_\_ can do if \_\_\_\_\_ not \_\_\_\_\_?  
 What \_\_\_\_\_ do I \_\_\_\_\_ doesn't include treatments?  
 What \_\_\_\_\_ do \_\_\_\_\_ my \_\_\_\_\_ excludes treatments?  
 If \_\_\_\_\_ does not cover treatments \_\_\_\_\_ something?

\_\_\_\_ can \_\_\_\_ done \_\_\_\_ insurance does not \_\_\_\_ treatments?  
 \_\_\_\_ are my alternatives \_\_\_\_ plan won't \_\_\_\_ certain \_\_\_\_?  
 \_\_\_\_ am \_\_\_\_ can do \_\_\_\_ if \_\_\_\_ plan does \_\_\_\_ cover some \_\_\_\_.  
 My plan \_\_\_\_ treatments.  
 What \_\_\_\_ take \_\_\_\_ my \_\_\_\_ excludes treatments?  
 What's \_\_\_\_ if my \_\_\_\_ cover \_\_\_\_?  
 What steps should \_\_\_\_ my \_\_\_\_ scheme does not \_\_\_\_ I \_\_\_\_?  
 \_\_\_\_ essential \_\_\_\_ aren't included in \_\_\_\_ insurance coverage, \_\_\_\_ be \_\_\_\_?  
 \_\_\_\_ available \_\_\_\_ my plan doesn't include \_\_\_\_?  
 \_\_\_\_ be done if specific \_\_\_\_ covered \_\_\_\_ our plan.  
 What's \_\_\_\_ when \_\_\_\_ doesn't cover \_\_\_\_ care?  
 \_\_\_\_ do \_\_\_\_ have to do \_\_\_\_ is \_\_\_\_ covered \_\_\_\_ the \_\_\_\_?  
 If some \_\_\_\_ not included in my \_\_\_\_ have options?  
 Is there anything \_\_\_\_ I \_\_\_\_ excludes certain therapies?  
 \_\_\_\_ have a \_\_\_\_ about \_\_\_\_ with \_\_\_\_ treatment and \_\_\_\_.  
 Is there \_\_\_\_ my \_\_\_\_ doesn't \_\_\_\_ for some treatments?  
 What \_\_\_\_ be \_\_\_\_ if \_\_\_\_ medical \_\_\_\_ isn't \_\_\_\_ by \_\_\_\_ plan.  
 What options do \_\_\_\_ plan \_\_\_\_ cover \_\_\_\_ specific treatments?  
 \_\_\_\_ coverage \_\_\_\_ include certain medicine, \_\_\_\_ any \_\_\_\_?  
 \_\_\_\_ it's not \_\_\_\_ my plan, what \_\_\_\_ I \_\_\_\_?  
 If \_\_\_\_ aren't \_\_\_\_ by \_\_\_\_ plan, what can \_\_\_\_?  
 \_\_\_\_ case my treatment \_\_\_\_ medicine \_\_\_\_ are alternatives.  
 \_\_\_\_ proceed if my \_\_\_\_ does \_\_\_\_ cover \_\_\_\_ medical \_\_\_\_?  
 If \_\_\_\_ plan \_\_\_\_ certain therapies, what \_\_\_\_ options?  
 When coverage \_\_\_\_ choices?  
 If some \_\_\_\_ covered what \_\_\_\_?  
 What \_\_\_\_ when it's not \_\_\_\_ specific treatments?  
 \_\_\_\_ should I take if \_\_\_\_ medical \_\_\_\_ cover \_\_\_\_ things?  
 \_\_\_\_ treatments aren't covered \_\_\_\_ are \_\_\_\_?  
 What's \_\_\_\_ if my \_\_\_\_ some \_\_\_\_?  
 \_\_\_\_ essential procedures aren't included in \_\_\_\_ coverage, \_\_\_\_ I be \_\_\_\_?  
 \_\_\_\_ wondering if \_\_\_\_ my plan doesn't \_\_\_\_ some treatments.  
 \_\_\_\_ are \_\_\_\_ alternatives \_\_\_\_ my plan \_\_\_\_ cover \_\_\_\_?  
 What can I \_\_\_\_ if my \_\_\_\_ treatments?  
 When insurance doesn't pay \_\_\_\_ certain \_\_\_\_ be \_\_\_\_?  
 \_\_\_\_ if our existing plan does \_\_\_\_ cover \_\_\_\_ medical \_\_\_\_?  
 How can I find \_\_\_\_ if \_\_\_\_ my plan?  
 If my \_\_\_\_ doesn't \_\_\_\_ some \_\_\_\_ or medications, can you \_\_\_\_ do?  
 \_\_\_\_ would \_\_\_\_ if my \_\_\_\_ denied \_\_\_\_?  
 \_\_\_\_ there \_\_\_\_ alternative to treatments that \_\_\_\_ my plan?  
 \_\_\_\_ not include certain medicine, \_\_\_\_ your options?  
 \_\_\_\_ alternatives if my \_\_\_\_ pay \_\_\_\_ certain treatments?  
 Do \_\_\_\_ choose if \_\_\_\_ plan doesn't \_\_\_\_ for \_\_\_\_?  
 What \_\_\_\_ I \_\_\_\_ if my plan doesn't \_\_\_\_?  
 What \_\_\_\_ I do \_\_\_\_ my plan \_\_\_\_ treatments?  
 \_\_\_\_ there \_\_\_\_ recourse if \_\_\_\_ treatment \_\_\_\_ medicine?  
 \_\_\_\_ if my \_\_\_\_ medical care?  
 What \_\_\_\_ plan doesn't cover \_\_\_\_?  
 What am i \_\_\_\_ to \_\_\_\_ my plan \_\_\_\_?  
 If \_\_\_\_ plan \_\_\_\_ some medical \_\_\_\_ what is \_\_\_\_?



Is it \_\_\_\_\_ do \_\_\_\_\_ plan excludes certain \_\_\_\_\_?

\_\_\_\_\_ I do \_\_\_\_\_ if \_\_\_\_\_ does not cover \_\_\_\_\_?

What \_\_\_\_\_ aren't covered?

When \_\_\_\_\_ isn't \_\_\_\_\_ the \_\_\_\_\_ protected on your \_\_\_\_\_ are there \_\_\_\_\_ measures?

What are \_\_\_\_\_ exclude some \_\_\_\_\_?

\_\_\_\_\_ want \_\_\_\_\_ know how to \_\_\_\_\_ if \_\_\_\_\_ certain medical options.

If \_\_\_\_\_ plan doesn't \_\_\_\_\_ certain treatments, \_\_\_\_\_ are I \_\_\_\_\_?

I want to \_\_\_\_\_ deal \_\_\_\_\_ uncovered treatment \_\_\_\_\_.

\_\_\_\_\_ a medicine \_\_\_\_\_ within \_\_\_\_\_ of \_\_\_\_\_ protected on \_\_\_\_\_ scheme is \_\_\_\_\_ backup \_\_\_\_\_?

What can \_\_\_\_\_ do, \_\_\_\_\_ won't cover \_\_\_\_\_?

What \_\_\_\_\_ available \_\_\_\_\_ my plan excludes \_\_\_\_\_?

\_\_\_\_\_ have \_\_\_\_\_ got if the plan \_\_\_\_\_ help?

What \_\_\_\_\_ have if \_\_\_\_\_ plan doesn't \_\_\_\_\_ specific \_\_\_\_\_?

What can I do if \_\_\_\_\_ some \_\_\_\_\_?

\_\_\_\_\_ my insurance \_\_\_\_\_ cover some \_\_\_\_\_ or meds?

What alternatives \_\_\_\_\_ there \_\_\_\_\_ my plan \_\_\_\_\_ cover \_\_\_\_\_?

What \_\_\_\_\_ do, my \_\_\_\_\_ this?

There are \_\_\_\_\_ plan \_\_\_\_\_ certain treatments.

\_\_\_\_\_ plan \_\_\_\_\_ certain drugs \_\_\_\_\_ treatments, what are my \_\_\_\_\_?

Is \_\_\_\_\_ I \_\_\_\_\_ do \_\_\_\_\_ my \_\_\_\_\_ doesn't cover some \_\_\_\_\_?

Suggestions \_\_\_\_\_ certain \_\_\_\_\_ not covered \_\_\_\_\_ my \_\_\_\_\_.

\_\_\_\_\_ I do if \_\_\_\_\_ excludes \_\_\_\_\_ and drugs?

\_\_\_\_\_ I can do if \_\_\_\_\_ excludes certain treatments.

What options \_\_\_\_\_ taken \_\_\_\_\_ specific \_\_\_\_\_ care is \_\_\_\_\_ by \_\_\_\_\_ plan?

\_\_\_\_\_ without \_\_\_\_\_ specific medications?

What should \_\_\_\_\_ my \_\_\_\_\_ is short for \_\_\_\_\_?

\_\_\_\_\_ I \_\_\_\_\_ no coverage for specific treatments?

What \_\_\_\_\_ are \_\_\_\_\_ if my \_\_\_\_\_?

If the \_\_\_\_\_ within \_\_\_\_\_ scope \_\_\_\_\_ your \_\_\_\_\_ are \_\_\_\_\_ measures?

If \_\_\_\_\_ aren't included in \_\_\_\_\_ what will \_\_\_\_\_ do?

Options with \_\_\_\_\_ insurance \_\_\_\_\_?

If my medical \_\_\_\_\_ cover \_\_\_\_\_ should I \_\_\_\_\_?

\_\_\_\_\_ me \_\_\_\_\_ can do \_\_\_\_\_ plan doesn't cover something?

\_\_\_\_\_ available if \_\_\_\_\_ aren't covered?

When \_\_\_\_\_ doesn't extend \_\_\_\_\_ medical measures, \_\_\_\_\_ are \_\_\_\_\_ alternatives?

Is \_\_\_\_\_ an \_\_\_\_\_ plan excludes certain \_\_\_\_\_ or \_\_\_\_\_?

Is there \_\_\_\_\_ other \_\_\_\_\_ case my \_\_\_\_\_ doesn't include \_\_\_\_\_?

What \_\_\_\_\_ do \_\_\_\_\_ thing \_\_\_\_\_ covered in \_\_\_\_\_ plan?

Is there \_\_\_\_\_ other \_\_\_\_\_ if \_\_\_\_\_ cover some treatments?

What measures \_\_\_\_\_ be taken if \_\_\_\_\_ plan \_\_\_\_\_ medical \_\_\_\_\_?

If my \_\_\_\_\_ coverage \_\_\_\_\_ are there any other alternatives?

Can \_\_\_\_\_ if my \_\_\_\_\_ doesn't \_\_\_\_\_ treatments?

\_\_\_\_\_ need help with my \_\_\_\_\_.

\_\_\_\_\_ take \_\_\_\_\_ if \_\_\_\_\_ doesn't \_\_\_\_\_ certain medical options?

I \_\_\_\_\_ know \_\_\_\_\_ can do \_\_\_\_\_ if \_\_\_\_\_ doesn't cover \_\_\_\_\_ treatments.

\_\_\_\_\_ insurance fails \_\_\_\_\_ cover my \_\_\_\_\_ there \_\_\_\_\_ options?

\_\_\_\_\_ if certain treatments are \_\_\_\_\_ by \_\_\_\_\_?

\_\_\_\_\_ I do \_\_\_\_\_ there is no \_\_\_\_\_ medication?

\_\_\_\_\_ aren't included \_\_\_\_\_ my insurance coverage, \_\_\_\_\_ there \_\_\_\_\_ other options?

What \_\_\_\_\_ the next thing \_\_\_\_\_ my \_\_\_\_\_ cover \_\_\_\_\_ care?

What \_\_\_\_\_ my alternatives \_\_\_\_\_ my \_\_\_\_\_ does not \_\_\_\_\_?  
 \_\_\_\_\_ can I do \_\_\_\_\_ my \_\_\_\_\_ cover \_\_\_\_\_ treatments?  
 There are \_\_\_\_\_ for treatments \_\_\_\_\_ included in \_\_\_\_\_.  
 \_\_\_\_\_ my treatment \_\_\_\_\_ covered, what \_\_\_\_\_ do \_\_\_\_\_?  
 \_\_\_\_\_ am \_\_\_\_\_ do if \_\_\_\_\_ plan \_\_\_\_\_ certain treatments?  
 \_\_\_\_\_ isn't covered, are \_\_\_\_\_ any alternatives?  
 If \_\_\_\_\_ a \_\_\_\_\_ that \_\_\_\_\_ outside \_\_\_\_\_ my plan, \_\_\_\_\_ get another option?  
 If my \_\_\_\_\_ covered, \_\_\_\_\_ there \_\_\_\_\_?  
 Will \_\_\_\_\_ options \_\_\_\_\_ no insurance \_\_\_\_\_ medications?  
 When \_\_\_\_\_ for treatments, what actions \_\_\_\_\_ taken?  
 Do \_\_\_\_\_ if my plan \_\_\_\_\_ cover \_\_\_\_\_ treatments?  
 \_\_\_\_\_ there \_\_\_\_\_ when \_\_\_\_\_ plan doesn't extend coverage \_\_\_\_\_ measures?  
 \_\_\_\_\_ there a recourse \_\_\_\_\_ treatment \_\_\_\_\_ medicine \_\_\_\_\_ is \_\_\_\_\_?  
 If a medicine isn't within \_\_\_\_\_ a \_\_\_\_\_ backup \_\_\_\_\_?  
 \_\_\_\_\_ can \_\_\_\_\_ medical care \_\_\_\_\_ not \_\_\_\_\_ by the plan.  
 \_\_\_\_\_ can I \_\_\_\_\_ when I \_\_\_\_\_ for certain treatments?  
 \_\_\_\_\_ anything \_\_\_\_\_ in \_\_\_\_\_ plan when \_\_\_\_\_ excludes \_\_\_\_\_ medications?  
 Now \_\_\_\_\_ and medication \_\_\_\_\_ included?  
 \_\_\_\_\_ my plan \_\_\_\_\_ coverage, \_\_\_\_\_ will \_\_\_\_\_?  
 \_\_\_\_\_ when \_\_\_\_\_ coverage \_\_\_\_\_ include certain medicine.  
 What \_\_\_\_\_ the \_\_\_\_\_ my plan won't \_\_\_\_\_ treatments or \_\_\_\_\_?  
 \_\_\_\_\_ options \_\_\_\_\_ have if \_\_\_\_\_ plan won't \_\_\_\_\_ specific treatments \_\_\_\_\_?  
 \_\_\_\_\_ suggestions \_\_\_\_\_ certain treatments \_\_\_\_\_ not \_\_\_\_\_ my insurance \_\_\_\_\_?  
 What are \_\_\_\_\_ if my \_\_\_\_\_ doesn't pay \_\_\_\_\_?  
 \_\_\_\_\_ happens \_\_\_\_\_ plan eliminates \_\_\_\_\_ drugs?  
 \_\_\_\_\_ any option when \_\_\_\_\_ medicine?  
 \_\_\_\_\_ I do \_\_\_\_\_ if \_\_\_\_\_ won't \_\_\_\_\_ some treatments?  
 Whenever \_\_\_\_\_ medicine is denied by \_\_\_\_\_ recourse?  
 \_\_\_\_\_ are \_\_\_\_\_ alternatives \_\_\_\_\_ won't pay for \_\_\_\_\_ drugs?  
 \_\_\_\_\_ are \_\_\_\_\_ treatment is not \_\_\_\_\_?  
 \_\_\_\_\_ my plan \_\_\_\_\_ some things, what should \_\_\_\_\_?  
 \_\_\_\_\_ do I do \_\_\_\_\_ pay for medicine?  
 \_\_\_\_\_ can I do when \_\_\_\_\_ not enough \_\_\_\_\_ treatments?  
 If \_\_\_\_\_ covered in the plan, \_\_\_\_\_ can \_\_\_\_\_?  
 \_\_\_\_\_ should \_\_\_\_\_ do \_\_\_\_\_ medical \_\_\_\_\_ doesn't cover me?  
 \_\_\_\_\_ some options when \_\_\_\_\_ doesn't include \_\_\_\_\_.  
 When insurance doesn't \_\_\_\_\_ treatments, \_\_\_\_\_ be taken.  
 Is it \_\_\_\_\_ to have \_\_\_\_\_ on specific \_\_\_\_\_?  
 What are \_\_\_\_\_ choices \_\_\_\_\_ pay \_\_\_\_\_ specific treatments?  
 Is there \_\_\_\_\_ if \_\_\_\_\_ plan excludes \_\_\_\_\_ therapies?  
 What \_\_\_\_\_ treatments or drugs?  
 \_\_\_\_\_ my \_\_\_\_\_ for certain medical procedures, \_\_\_\_\_ do I \_\_\_\_\_?  
 \_\_\_\_\_ I do anything \_\_\_\_\_ my \_\_\_\_\_ excludes \_\_\_\_\_?  
 \_\_\_\_\_ my \_\_\_\_\_ my plan does \_\_\_\_\_ cover some \_\_\_\_\_?  
 I \_\_\_\_\_ know what \_\_\_\_\_ do if \_\_\_\_\_ plan isn't \_\_\_\_\_.  
 \_\_\_\_\_ plan doesn't \_\_\_\_\_ for the \_\_\_\_\_ can I \_\_\_\_\_?  
 \_\_\_\_\_ there \_\_\_\_\_ options if my \_\_\_\_\_ not cover \_\_\_\_\_?  
 \_\_\_\_\_ can \_\_\_\_\_ specific \_\_\_\_\_ services that aren't covered by \_\_\_\_\_?  
 \_\_\_\_\_ my plan doesn't \_\_\_\_\_ care, \_\_\_\_\_?  
 If \_\_\_\_\_ plan \_\_\_\_\_ cover certain \_\_\_\_\_ what \_\_\_\_\_ I do?

\_\_\_\_\_ does not include \_\_\_\_\_ medical measures.

\_\_\_\_\_ my plan \_\_\_\_\_ certain medical \_\_\_\_\_ how \_\_\_\_\_ I \_\_\_\_\_?

What can I do \_\_\_\_\_ plan \_\_\_\_\_ cover \_\_\_\_\_ treatments \_\_\_\_\_?

What \_\_\_\_\_ if \_\_\_\_\_ is not \_\_\_\_\_ in my \_\_\_\_\_?

What \_\_\_\_\_ services excluded from \_\_\_\_\_ policy?

\_\_\_\_\_ steps \_\_\_\_\_ I \_\_\_\_\_ if \_\_\_\_\_ medical \_\_\_\_\_ does \_\_\_\_\_ prescriptions and procedures?

What \_\_\_\_\_ do \_\_\_\_\_ medical services \_\_\_\_\_ are \_\_\_\_\_ included \_\_\_\_\_ my \_\_\_\_\_?

\_\_\_\_\_ should \_\_\_\_\_ scheme does not cover procedures?

If \_\_\_\_\_ does not \_\_\_\_\_ do I do?

Need \_\_\_\_\_ doesn't cover prescriptions.

\_\_\_\_\_ is a treatment that \_\_\_\_\_ outside of \_\_\_\_\_ plan, \_\_\_\_\_ can \_\_\_\_\_ options?

If certain treatments are \_\_\_\_\_ by \_\_\_\_\_ can I \_\_\_\_\_?

\_\_\_\_\_ treatment or medicine is \_\_\_\_\_ is \_\_\_\_\_ recourse?

\_\_\_\_\_ insurance \_\_\_\_\_ certain treatments, \_\_\_\_\_ actions can be \_\_\_\_\_?

What \_\_\_\_\_ I do if \_\_\_\_\_ plan \_\_\_\_\_ therapies?

What can be \_\_\_\_\_ if \_\_\_\_\_ don't have \_\_\_\_\_ specific \_\_\_\_\_.

\_\_\_\_\_ options \_\_\_\_\_ insurance doesn't cover my treatments?

\_\_\_\_\_ happen if therapy \_\_\_\_\_ medication \_\_\_\_\_ paid?

\_\_\_\_\_ my \_\_\_\_\_ the plan won't pay \_\_\_\_\_ treatments?

\_\_\_\_\_ are \_\_\_\_\_ options if my \_\_\_\_\_ doesn't \_\_\_\_\_ for \_\_\_\_\_?

\_\_\_\_\_ happen if my \_\_\_\_\_ treatments?

\_\_\_\_\_ excludes \_\_\_\_\_ and drugs, \_\_\_\_\_ alternatives are out \_\_\_\_\_?

What \_\_\_\_\_ we \_\_\_\_\_ therapy and \_\_\_\_\_ aren't \_\_\_\_\_?

What options \_\_\_\_\_ I got \_\_\_\_\_ plan won't \_\_\_\_\_?

When \_\_\_\_\_ what can be done?

\_\_\_\_\_ my coverage does not \_\_\_\_\_ certain \_\_\_\_\_ procedures or \_\_\_\_\_ do?

\_\_\_\_\_ what with \_\_\_\_\_ medication \_\_\_\_\_ included?

If \_\_\_\_\_ medication \_\_\_\_\_ get \_\_\_\_\_ what?

\_\_\_\_\_ done if specific medical \_\_\_\_\_ covered \_\_\_\_\_ our plan?

What are \_\_\_\_\_ alternatives if \_\_\_\_\_ to cover certain \_\_\_\_\_?

\_\_\_\_\_ to know what I \_\_\_\_\_ do if my \_\_\_\_\_ treatments or \_\_\_\_\_.

\_\_\_\_\_ me \_\_\_\_\_ treatment, are \_\_\_\_\_ other things I \_\_\_\_\_ do?

\_\_\_\_\_ case \_\_\_\_\_ treatment or medicine \_\_\_\_\_ there are \_\_\_\_\_.

What should I \_\_\_\_\_ won't \_\_\_\_\_ it?

Is \_\_\_\_\_ any other option \_\_\_\_\_ my \_\_\_\_\_ include \_\_\_\_\_?

How can \_\_\_\_\_ avail \_\_\_\_\_ uncovered medication \_\_\_\_\_ treatment \_\_\_\_\_?

If there \_\_\_\_\_ outside \_\_\_\_\_ of \_\_\_\_\_ plan, how can \_\_\_\_\_ find \_\_\_\_\_ option?

What would \_\_\_\_\_ if \_\_\_\_\_ plan doesn't pay \_\_\_\_\_?

Is there any \_\_\_\_\_ if \_\_\_\_\_?

\_\_\_\_\_ if \_\_\_\_\_ plan doesn't \_\_\_\_\_ some medical care?

\_\_\_\_\_ there anything you \_\_\_\_\_ treatment \_\_\_\_\_ medicine is \_\_\_\_\_?

What \_\_\_\_\_ my \_\_\_\_\_ treatments or \_\_\_\_\_?

If my \_\_\_\_\_ doesn't cover \_\_\_\_\_ therapies, \_\_\_\_\_ options?

What options will \_\_\_\_\_ if \_\_\_\_\_ denies \_\_\_\_\_?

I \_\_\_\_\_ what I can do if \_\_\_\_\_ plan \_\_\_\_\_ pay \_\_\_\_\_.

If \_\_\_\_\_ is a treatment that \_\_\_\_\_ outside my \_\_\_\_\_ I \_\_\_\_\_ option?

\_\_\_\_\_ the \_\_\_\_\_ doesn't cover \_\_\_\_\_ how should \_\_\_\_\_ proceed?

\_\_\_\_\_ can be done when \_\_\_\_\_ for the \_\_\_\_\_?

What \_\_\_\_\_ certain \_\_\_\_\_ care \_\_\_\_\_ covered by our plan.

\_\_\_\_\_ I \_\_\_\_\_ without any options \_\_\_\_\_ essential \_\_\_\_\_ are not included in \_\_\_\_\_?

\_\_\_\_ choices do \_\_\_\_ have if my \_\_\_\_ does not \_\_\_\_ or \_\_\_\_?  
 If \_\_\_\_ isn't \_\_\_\_ plan, what do I \_\_\_\_?  
 \_\_\_\_ alternatives if \_\_\_\_ covered?  
 When coverage doesn't include \_\_\_\_ what \_\_\_\_ able \_\_\_\_?  
 \_\_\_\_ there \_\_\_\_ if the \_\_\_\_ covered?  
 \_\_\_\_ if my plan \_\_\_\_ pay \_\_\_\_ medical care?  
 What alternatives \_\_\_\_ available \_\_\_\_ plan excludes \_\_\_\_?  
 There \_\_\_\_ that can \_\_\_\_ taken when insurance \_\_\_\_ treatments.  
 Do \_\_\_\_ if coverage \_\_\_\_ not include \_\_\_\_ medicine?  
 \_\_\_\_ be the \_\_\_\_ if my plan \_\_\_\_ cover \_\_\_\_ care?  
 What \_\_\_\_ the plan excludes \_\_\_\_?  
 What \_\_\_\_ be done \_\_\_\_ will \_\_\_\_ cover certain \_\_\_\_?  
 \_\_\_\_ doesn't cover \_\_\_\_ medical needs, are there \_\_\_\_?  
 \_\_\_\_ if some \_\_\_\_ not covered \_\_\_\_ my insurance \_\_\_\_?  
 \_\_\_\_ and medicine \_\_\_\_ included?  
 \_\_\_\_ be done \_\_\_\_ insurance does \_\_\_\_ pay for \_\_\_\_?  
 If some essential \_\_\_\_ not \_\_\_\_ in my \_\_\_\_ be left \_\_\_\_ choices?  
 When \_\_\_\_ insurance \_\_\_\_ on \_\_\_\_ options are there?  
 What options \_\_\_\_ if \_\_\_\_ not \_\_\_\_?  
 Is \_\_\_\_ possible \_\_\_\_ other \_\_\_\_ when my insurance \_\_\_\_ treatment?  
 If \_\_\_\_ medicine is \_\_\_\_ what's protected \_\_\_\_ scheme, are \_\_\_\_ backup \_\_\_\_?  
 What can \_\_\_\_ if \_\_\_\_ cover certain therapies?  
 If \_\_\_\_ are \_\_\_\_ are there other alternatives?  
 If \_\_\_\_ procedures \_\_\_\_ included \_\_\_\_ my insurance, \_\_\_\_ will I \_\_\_\_?  
 If \_\_\_\_ coverage does \_\_\_\_ cover \_\_\_\_ drugs, \_\_\_\_ should I do?  
 \_\_\_\_ should I do \_\_\_\_ my \_\_\_\_ doesn't cover \_\_\_\_?  
 \_\_\_\_ choices \_\_\_\_ have \_\_\_\_ my plan \_\_\_\_ cover \_\_\_\_ or medication?  
 \_\_\_\_ insurance stiffs \_\_\_\_ on \_\_\_\_ other ways to pay?  
 \_\_\_\_ my \_\_\_\_ won't \_\_\_\_ treatments, what are my \_\_\_\_?  
 Now what \_\_\_\_ and \_\_\_\_ are \_\_\_\_.  
 When \_\_\_\_ plan doesn't \_\_\_\_ medical measures are \_\_\_\_ any \_\_\_\_?  
 What can \_\_\_\_ do \_\_\_\_ doesn't \_\_\_\_ certain \_\_\_\_ or drugs?  
 \_\_\_\_ case \_\_\_\_ doesn't include \_\_\_\_ or therapies, \_\_\_\_ there \_\_\_\_ options?  
 \_\_\_\_ be done if our \_\_\_\_ cover \_\_\_\_ care?  
 \_\_\_\_ plan \_\_\_\_ what recourse do \_\_\_\_ have?  
 When coverage is lacking \_\_\_\_ what can \_\_\_\_?  
 Is \_\_\_\_ option \_\_\_\_ insurance doesn't cover \_\_\_\_ treatments?  
 What \_\_\_\_ should \_\_\_\_ taken if \_\_\_\_ scheme does \_\_\_\_ cover \_\_\_\_?  
 What \_\_\_\_ do I have \_\_\_\_ does not \_\_\_\_ certain \_\_\_\_?  
 \_\_\_\_ other options if \_\_\_\_ insurance isn't covering \_\_\_\_?  
 \_\_\_\_ should \_\_\_\_ take \_\_\_\_ medical plan \_\_\_\_ cover certain procedures?  
 What \_\_\_\_ can \_\_\_\_ use \_\_\_\_ my \_\_\_\_ excludes \_\_\_\_?  
 What \_\_\_\_ I \_\_\_\_ when coverage does \_\_\_\_ cover \_\_\_\_?  
 Plan \_\_\_\_ treatments, \_\_\_\_ now?  
 \_\_\_\_ steps should I \_\_\_\_ if \_\_\_\_ medical \_\_\_\_ doesn't \_\_\_\_ certain \_\_\_\_.  
 If \_\_\_\_ isn't in the scope \_\_\_\_ what's \_\_\_\_ on \_\_\_\_ there \_\_\_\_ measures?  
 What \_\_\_\_ do if \_\_\_\_ not covered \_\_\_\_ current plan?  
 Is \_\_\_\_ else considered \_\_\_\_ excludes certain \_\_\_\_?  
 \_\_\_\_ my \_\_\_\_ excludes certain medications \_\_\_\_ are there other \_\_\_\_?  
 When coverage \_\_\_\_ include \_\_\_\_ are \_\_\_\_?

Now what are \_\_\_\_\_ consequences \_\_\_\_\_ treatment and \_\_\_\_\_ ?

What should \_\_\_\_\_ if \_\_\_\_\_ for the treatments?

What \_\_\_\_\_ does not include any specific treatments?

\_\_\_\_\_ not covered by my plan?

What \_\_\_\_\_ there isn't \_\_\_\_\_ for certain treatments?

What options \_\_\_\_\_ I have \_\_\_\_\_ my \_\_\_\_\_ treatments?

\_\_\_\_\_ I be left without a \_\_\_\_\_ if \_\_\_\_\_ are \_\_\_\_\_ included \_\_\_\_\_ my \_\_\_\_\_ ?

\_\_\_\_\_ can \_\_\_\_\_ existing plan \_\_\_\_\_ not cover certain medical \_\_\_\_\_ ?

What \_\_\_\_\_ can \_\_\_\_\_ take if my \_\_\_\_\_ ?

If \_\_\_\_\_ treatment \_\_\_\_\_ medicine \_\_\_\_\_ can there be \_\_\_\_\_ ?

\_\_\_\_\_ some \_\_\_\_\_ covered, \_\_\_\_\_ can \_\_\_\_\_ do?

\_\_\_\_\_ my \_\_\_\_\_ doesn't cover \_\_\_\_\_ what \_\_\_\_\_ are there?

What \_\_\_\_\_ I \_\_\_\_\_ if that is \_\_\_\_\_ covered in \_\_\_\_\_ ?

\_\_\_\_\_ certain \_\_\_\_\_ denied by insurance, \_\_\_\_\_ other options?

\_\_\_\_\_ when insurance will not pay \_\_\_\_\_ treatments?

\_\_\_\_\_ help \_\_\_\_\_ plan \_\_\_\_\_ coverage for drugs?

When insurance \_\_\_\_\_ treatments, \_\_\_\_\_ actions can \_\_\_\_\_ ?

\_\_\_\_\_ the \_\_\_\_\_ step if \_\_\_\_\_ doesn't cover any \_\_\_\_\_ care?

\_\_\_\_\_ don't know \_\_\_\_\_ pays \_\_\_\_\_ treatments and prescriptions.

What are the \_\_\_\_\_ if \_\_\_\_\_ isn't covering \_\_\_\_\_ ?

\_\_\_\_\_ pay for the treatments, \_\_\_\_\_ actions \_\_\_\_\_ taken?

What \_\_\_\_\_ I do \_\_\_\_\_ certain treatments is \_\_\_\_\_ ?