

[Demo] NLP Dataset for Customer Service Automation

Company Type	Health Insurance Companies
Inquiry Category	Dental, vision, or ancillary service plan inclusions
Inquiry Sub-Category	Preauthorization requirements
Description	Inquiries about the process and criteria for preauthorizing specific treatments or procedures.
Data Size	5,092 paraphrases
Want to buy data?	Please contact nlp-data@gross.me via your business email address.

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

____ can ____ determine if specific medical ____ prior authorization ____ our ____ services benefit ____?

Do ____ the ancillary services benefit ____ requires pre-approval for ____?

Can ____ if a ____ piece of ____ equipment ____ authorization when included ____ coverage offered ____ health plans?

____ for us to ____ approval of ____ tools ____ our ancillary ____ provision?

Does ____ ancillary services benefit ____ prior ____ certain medical ____?

Can we determine ____ health plan requires a ____?

____ required ____ to ____ medical ____ by ____ health ____ ancillary service benefit?

____ want to know ____ certain medical equipment need ____ health plans' ____.

Can ____ tell ____ medical equipment need prior ____ health plan's ____?

It ____ certain medical equipment ____ prior authorization ____ benefit package.

____ required before using ____ in our health ____ benefits?

____ you know ____ certain ____ need ____ authorization ____ to our health ____ benefits ____?

____ the ____ services benefit package ____ for ____ medical equipment?

____ might need ____ authorization from ____ plan ____ have ____ for ancillary services.

Do you ____ whether our health ____ services ____ prior ____ medical equipment?

Is certain ____ under our ____ plan ____ ancillary services?

____ question if certain medical equipment requires prior ____ plan ____ services benefit package ____ you ____ or ____ the ____ package requires prior ____ specific medical equipment.

____ you confirm ____ or not ____ benefit package ____ prior ____ for ____ medical ____?

We ____ if ____ services benefit package requires ____ for ____ medical ____.

____ apparatus will require ____ before they ____ included in our ____ service ____?

____ health ____ going ____ require a ____ for medical ____ when ____ to ____ services?

____ health ____ requirement ____ pre-approval for medical ____ added to ____ services?

Can ____ tell us ____ ancillary services benefit ____ a requirement ____ pre-approval ____ specific ____?

Do ____ if ____ plan's ____ benefit package requires ____ authorization for specific ____?

____ permission ____ our health ____ necessary for ____ items ____ our ____ service ____?

____ certain medical equipment requires prior authorization ____ health ____ plan ____ services ____ it is ____.

____ don't know how ____ determine if ____ equipment needs prior permission ____ plan ancillary ____

____ don't ____ to decide ____ needs permission under ____ ancillary ____ package.

____ required prior ____ using ____ for our health plan's ____ service ____?

Do we ____ prior ____ medical ____ the ____ services benefit package?

_____ are interested _____ from _____ plan to _____ certain _____ in ancillary services
 Do _____ need _____ from the _____ for _____ equipment _____ ancillary _____ benefit package?
 _____ there _____ requirement for prior approval _____ individual _____ covered _____ ancillary _____?
 _____ prior authorization from _____ in order to use medical equipment _____ ancillary services.
 Will we _____ a _____ for medical _____ in _____ ancillary _____ package?
 Will our health _____ a pre-approval _____ our _____ servicespackage?
 _____ to _____ if or _____ ancillary services _____ package _____ prior authorization _____ specific medical equipment.
 _____ tell us if our health _____ any medical equipment?
 _____ possible _____ certain _____ needs prior _____ for _____ ancillary services _____ package?
 We don't _____ to determine _____ equipment _____ prior permission _____ the ancillary _____.
 _____ don't know how _____ if specific _____ prior permission _____ the _____ plan _____ services benefit.
 It is a question if certain _____ requires _____ our _____ for ancillary _____.
 What _____ we use _____ whether a _____ piece of medical _____ requires prior _____ included _____ coverage
 _____ in our health _____
 Is certain _____ by _____ plan for ancillary services _____?
 Is _____ a process _____ determining _____ specific medical _____ advanced _____ according _____ our health _____ coverage?
 _____ to know if _____ ancillary services _____ package requires _____ for _____.
 _____ we _____ health plan _____ for medical equipment in _____ ancillary _____ package?
 Is there _____ pre-approval for medical equipment in _____ services _____?
 _____ clarify _____ specific _____ needs prior _____ the health _____ ancillary services?
 Will _____ see _____ the _____ plan _____ pre- approval for _____ equipment when _____ to _____?
 _____ medical equipment _____ need _____ authorization in _____ ancillary _____ benefit package.
 _____ way to determine if specific _____ endorsement from the _____ benefits?
 _____ our _____ benefit package _____ authorization for specific _____ equipment?
 _____ the ancillary _____ benefit _____ need _____ authorization from _____ for _____ medical equipment?
 What _____ can we use _____ determine whether _____ of _____ necessitates _____ authorization _____ in supplementary
 _____?
 _____ not know _____ to _____ if _____ medical equipment _____ permission under _____ package.
 _____ would _____ to know _____ services _____ requires prior authorization _____ specific _____ equipment.
 _____ health plan's ancillary _____ benefit package _____ prior _____ for _____ equipment?
 _____ the health plan require a _____ approval _____ equipment _____ services?
 We might _____ to _____ prior authorization from _____ health _____ to _____ medical equipment for _____.
 _____ the health plan requiring _____ medical _____ the benefit _____?
 Does our _____ to _____ medical _____ ancillary services benefit package?
 We _____ how to _____ specific medical _____ under _____ ancillary service package.
 _____ want _____ know if specific medical equipment _____ in _____ plan's _____ ancillary.
 Is it _____ certain equipment _____ health _____ services?
 Is it necessary for _____ ancillary _____ benefits _____ use of _____ medical _____?
 _____ may _____ prior authorization _____ health _____ in order to _____ medical _____ for _____.
 _____ can we _____ specialized _____ require _____ included in our auxiliary _____ coverage?
 _____ can we _____ if _____ apparatus will _____ they are included in _____ auxiliary service _____?
 When _____ services are _____ the health _____ there be _____ medical equipment?
 Can _____ confirm _____ medical _____ requires prior _____ our benefit _____?
 _____ our _____ plan requiring a pre-authorization for _____ services package?
 _____ can we determine if _____ specialized apparatus _____ before they are _____ in our _____?
 Is it possible _____ identify what _____ our benefits package?
 Is it _____ to get _____ for _____ healthcare _____ in _____ services _____?
 Specific medical equipment may _____ prior authorization _____ plan's _____
 _____ we required _____ get permission _____ certain items _____ our ancillary services benefit package _____?
 _____ us _____ the _____ services benefit package includes pre-approval _____ specific _____.
 I was _____ the health _____ ancillary services benefit _____ for specific _____.

_____ requirement _____ for certain medical equipment as part _____ ancillary _____ package?

We _____ not _____ how _____ determine if specific _____ equipment _____ permission under _____ health _____ benefit.

Is it possible to determine _____ requires earlier _____ health policy's _____?

We might need to get _____ authorization _____ to _____ equipment _____ services _____ required prior to _____ certain _____ equipment _____ service benefits?

_____ to using a _____ medical equipment _____ by _____ health _____ ancillary service _____?

_____ you _____ if or not _____ requires _____ authorization for _____ medical equipment?

_____ if _____ ancillary service package requires _____ for _____ equipment?

_____ we _____ if _____ ancillary _____ a pre-approval for medical _____?

Will _____ our health plan requires pre-approval _____ equipment in _____ package?

_____ certain _____ requires _____ authorization for our health _____ ancillary services _____ package there _____ ways.

_____ if _____ health _____ requires a pre-approval for _____ equipment when added _____?

Under the _____ ancillary services benefit _____ if specific medical equipment needs _____ permission.

Do you _____ if the ancillary _____ requires pre-_____ for _____?

We _____ know if specific medical _____ prior _____ service package.

_____ us if our health plan _____ permission to _____ specific medical _____?

Is certain medical equipment _____ health insurance _____ services benefits?

_____ plan include _____ medical _____ when it is added to ancillary _____?

I'm _____ in knowing if specific _____ health _____ ancillary benefits.

Will the ancillary _____ pre-approval for _____ equipment _____ it?

Will _____ know _____ the health plan requires _____ for medical _____ ancillary _____?

_____ you tell _____ medical _____ need prior permission _____ health plan's ancillary _____?

_____ certain medical equipment required prior approval in _____ insurance _____?

_____ a particular medical equipment covered _____ ancillary service _____?

Certain medical _____ for _____ services benefits.

_____ health plan's _____ services benefit _____ have prior authorization for _____ medical _____?

It is possible that certain _____ authorization _____ our _____ insurance plan _____ ancillary _____ benefit _____.

Can we _____ medical _____ in our health insurance _____ for _____ services.

_____ equipment requires _____ for our health insurance _____ ancillary _____ it _____ a question.

There is _____ question of if certain medical _____ authorization _____ insurance _____ ancillary services benefit _____.

_____ required before _____ a particular _____ covered in our _____ plan's _____ benefits

_____ you tell us _____ medical equipment need _____ in _____ ancillary _____?

How _____ we _____ if specialized _____ will _____ being _____ our auxiliary service _____?

_____ are certain _____ equipment _____ our health insurance _____ ancillary services benefit package.

For certain items in _____ ancillary _____ necessary for us to _____ from _____ health _____?

Can _____ get _____ from our health plan for specialized _____ in _____?

Will _____ have _____ pre-approval _____ medical equipment when added to _____ services?

Can you clarify _____ ancillary _____ benefit _____ requires prior authorization _____?

_____ may require prior authorization for our _____ ancillary _____ benefits.

_____ specific medical _____ need _____ in our health _____ ancillary ancillary.

_____ to identify which _____ gear needs _____ our _____ package.

_____ can we use to _____ a piece of _____ equipment requires _____ included in _____?

_____ necessary for _____ health plan's _____ benefits _____ approve _____ use _____ particular _____ equipment?

_____ requirement _____ approval of individual healthcare _____ covered _____ ancillary services provision?

_____ to determine _____ specific _____ needs prior permission under the _____ package.

_____ do _____ know how to determine _____ specific _____ permission under _____ service package of _____.

We _____ need _____ from our _____ use medical equipment in ancillary _____.

We need to know _____ not _____ services _____ package _____ for specific medical _____.

If _____ medical equipment _____ our health insurance _____ for ancillary services benefit _____ do this.

_____ required before using _____ equipment _____ ancillary _____ benefits?

I _____ if _____ medical equipment need prior _____ in the _____ services.

_____ it possible _____ determine _____ endorsement _____ the _____ policy's ancillary benefits?

Can we know _____ plan _____ pre-approval for medical _____?

Is approval necessary _____ using _____ in our _____ ancillary services _____?

_____ do I _____ equipment requires _____ endorsement from _____ policy's _____ benefits?

_____ like _____ know _____ specific medical _____ prior authorization in _____ ancillary services.

What criteria can _____ determine whether _____ particular _____ apparatus _____ prior authorization when included in _____ coverage _____ by _____ plans

Can we tell _____ specialized apparatus _____ need _____ included _____ our _____ service _____?

_____ it necessary _____ get _____ from _____ health plan before buying _____ for _____ services?

_____ criteria can _____ use _____ if _____ specific piece of _____ necessitates _____ authorization _____ included _____ the supplementary coverage _____ by our _____

_____ to see if our _____ for _____ equipment in our ancillary services package?

_____ need _____ from our health _____ specialized equipment that _____ the _____ package?

Is it _____ specialized _____ require _____ before they _____ included in _____ auxiliary service coverage?

approval _____ before using _____ medical equipment _____ ancillary service benefits

_____ clarify _____ specific _____ prior _____ our health plan _____ services benefit package.

_____ you tell _____ the _____ services _____ package that requires pre-approval _____ equipment?

Is _____ necessary for the _____ benefit _____ to give prior authorization _____ medical _____?

_____ included _____ the supplementary coverage offered within _____ can _____ establish whether a particular _____ apparatus _____ prior _____?

Could you tell _____ the ancillary _____ package _____ prior authorization _____ medical _____?

_____ to _____ whether certain equipment requires endorsement from our _____?

_____ if certain medical equipment requires _____ authorization under _____ health _____ plan _____?

_____ clarify whether specific _____ need _____ our health _____ ancillary service?

How can we _____ if specialized apparatus will _____ before _____ the _____ coverage?

Is our _____ required _____ equipment when added _____ ancillary services?

Will _____ find out if _____ plan _____ for medical _____?

Do you _____ services _____ package _____ prior authorization _____ medical equipment?

_____ plan demand _____ for _____ equipment in _____ services package?

_____ may need prior _____ our health _____ ancillary services benefit _____.

Will we _____ if _____ health plan _____ pre- _____ for _____ added _____ ancillary _____?

Is _____ possible _____ confirm _____ falls _____ plan's ancillary benefits _____ rules?

If _____ medical _____ requires prior _____ our _____ plan _____ ancillary _____ benefit package, is _____ possible?

Will we know if _____ plan _____ medical _____ when ancillary _____ added?

Should _____ get _____ from our health _____ the ancillary services _____ package?

_____ confirm that certain _____ prior approval _____ ancillary _____ benefits?

Do _____ have to _____ before including _____ apparatus _____ our auxiliary _____?

We need _____ the ancillary services benefit package requires _____ authorization _____ equipment.

_____ way _____ certain medical equipment _____ prior _____ under our health insurance plan _____ ancillary _____.

Is _____ necessary for us _____ from our health plan _____ specific _____ equipment _____ services?

_____ it necessary for us _____ get _____ from _____ use the _____ equipment in the ancillary _____?

What criteria can we use _____ if _____ particular _____ of medical _____ necessitates _____ authorization when included in _____ plans

_____ it _____ to find out _____ endorsement from our health policy's _____?

_____ required before using _____ equipment _____ is _____ ancillary _____?

What criteria can _____ use _____ if a certain _____ of _____ apparatus necessitates _____ authorization when included in _____ within _____

_____ there a requirement for prior authorization for _____ equipment _____ health _____ services _____?

Can _____ certain _____ is required _____ benefits _____ our health insurance plan?

_____ our health _____ for _____ equipment _____ the ancillary services package?

Is _____ a _____ determining _____ medical device _____ advanced authorization according to _____ health plan's _____ ?

What is _____ requirement _____ getting prior approval _____ individual _____ our _____ provision?

Is _____ possible that certain _____ equipment _____ prior approval for _____ insurance plan _____ benefit _____ ?

We _____ know if _____ need _____ before they _____ included in _____ coverage.

Is it _____ to _____ prior _____ healthcare _____ in _____ ancillary services _____ ?

Will _____ if our _____ requires pre-approval for medical equipment when _____ ?

Will we see if the health _____ pre-approval _____ medical _____ ?

_____ it _____ us to _____ health plan to have _____ in _____ ancillary service package?

We _____ get prior _____ from _____ health _____ in _____ to use _____ in ancillary services.

_____ if _____ medical equipment needs prior _____ for ancillary _____ coverage.

Is _____ medical _____ required for _____ ancillary services _____ health insurance _____ ?

_____ the process for evaluating _____ authorization according to _____ health plan's benefits coverage?

_____ a _____ approval _____ individual healthcare tools in our ancillary service _____ ?

_____ see _____ our health plan requires a pre-approval _____ added _____ ancillary _____

_____ clarify _____ or not _____ services _____ demands prior authorization _____ medical equipment?

_____ prior _____ of _____ healthcare _____ covered _____ our ancillary services provision?

_____ you clarify if medical _____ authorization _____ our health _____ ancillary _____ ?

_____ possible _____ certain _____ equipment _____ prior authorization for our _____ plan for _____ .

We don't know if the ancillary _____ package requires _____ .

I _____ not the ancillary services _____ package demands _____ authorization for _____ equipment.

Is _____ necessary _____ our health _____ plan for _____ services?

_____ criteria _____ use to _____ if _____ of _____ apparatus _____ prior _____ when included in supplementary _____ ?

Is permission from our _____ our ancillary service package?

I _____ on how to determine _____ equipment requires _____ endorsement _____ health policy's _____ .

_____ equipment needs _____ in our health plan ancillary _____ package, can _____ ?

_____ might need _____ get _____ approval from our health _____ in order to _____ .

_____ have _____ idea _____ determine if specific equipment _____ endorsement _____ health _____ ancillary benefits.

If our health _____ requires _____ medical _____ part _____ the _____ benefit package?

_____ criteria can _____ use _____ if a particular piece _____ medical equipment _____ prior authorization when _____ in _____ health plans

Do we know _____ health _____ requires _____ for _____ equipment?

Is approval required prior _____ using medical _____ by the _____ service _____ ?

ancillary services _____ that may _____ for certain _____ equipment _____ health _____ .

Can we _____ requires prior authorization _____ our _____ insurance plan for _____ ?

ancillary services benefit _____ prior authorization for _____ medical _____

_____ need to _____ if _____ medical equipment need _____ our _____ plan's ancillary _____ .

_____ authorization from _____ plan _____ to have medical equipment for _____ services.

_____ equipment requires prior authorization for our health insurance _____ that's a question.

Is it possible _____ certain _____ to our health _____ benefits?

Is it possible _____ determine _____ specific _____ requires _____ our _____ benefits?

We might have to get _____ authorization _____ medical _____ ancillary services.

_____ medical _____ may _____ prior authorization _____ health plan has _____ services _____ .

_____ need to know whether _____ need prior authorization in _____ health _____ .

We _____ to know if or _____ the _____ benefit _____ prior authorization for _____ .

_____ are trying _____ from _____ health _____ to use _____ in ancillary services.

_____ required before _____ equipment _____ by ancillary _____ a _____ plan?

_____ it _____ for _____ plan for ancillary services benefit package _____ certain medical equipment?

Will we _____ a pre-approval _____ medical equipment _____ our ancillary services?

We _____ get _____ authorization _____ health plan _____ medical equipment _____ ancillary services.

If _____ plan requires a pre-approval for medical _____ ancillary _____ will _____ ?

_____ permission _____ health plan necessary for certain _____ in _____ package?

_____ need prior _____ our health _____ in _____ to _____ medical _____ in this ancillary _____.

_____ services benefits _____ for _____ equipment

I _____ needs _____ endorsement from our health policy's ancillary _____.

It is a _____ of _____ medical equipment requires _____ authorization for _____ plan for _____ package.

We _____ know _____ medical equipment needs permission under _____ ancillary service _____.

_____ before using a particular _____ covered by our health plan's _____?

_____ our health _____ for _____ equipment in the benefit _____?

We would like to know _____ medical _____ prior _____ in _____ ancillary _____.

Our _____ ancillary services benefit package may need prior _____.

Some _____ prior authorization for ancillary _____ benefits.

_____ we know if _____ health plan requires _____ pre-authorization _____ equipment _____ services?

I'm _____ figure out if specific equipment _____ from _____ health _____ benefits.

Can _____ me _____ certain medical equipment _____ prior authorization under _____ benefit _____?

_____ we find _____ if _____ ancillary services package _____ pre-approval _____ equipment?

_____ necessary for _____ plan _____ give _____ items in our _____ services benefit package before?

_____ tell me _____ our health _____ permission for _____ specific _____ equipment?

_____ specific _____ need prior authorization _____ our _____ plan's _____ ancillary?

_____ to get _____ from our _____ plan for certain items _____ services _____ package?

Is _____ possible for the _____ insurance _____ ancillary _____ to have _____ authorization _____ equipment?

Can _____ us _____ if the ancillary services _____ requires _____ specific medical _____?

It's not easy _____ determine _____ specific medical equipment _____ under _____ health plan _____.

We _____ to _____ if the _____ requires pre-approval _____ specific _____ equipment.

_____ you _____ equipment need _____ our health plan's ancillary ancillary?

Is _____ a process for determining whether certain _____ advanced _____ our _____ benefits coverage?

Can _____ if specific medical _____ need _____ in _____ plan _____ services _____ package?

Is _____ to _____ equipment in _____ plans' ancillary services?

_____ it _____ for _____ plan _____ services _____ package _____ give prior _____ specific medical equipment?

We may _____ to get prior _____ our health plan _____ have _____ equipment for _____.

_____ you _____ if specific medical _____ prior authorization _____ our _____ plan _____?

_____ necessary for us to _____ before using certain items in _____ services benefit package?

There are _____ medical equipment _____ require _____ authorization _____ our _____ insurance plan _____ ancillary _____.

_____ we see _____ health _____ requires _____ for medical equipment when _____ ancillary _____?

Is there a _____ for _____ authorization _____ certain _____ equipment _____ ancillary services _____?

_____ know how _____ out _____ specific medical _____ needs _____ the ancillary service _____.

_____ you _____ whether specific _____ require prior authorization _____ health plan's _____?

_____ plan require authorization _____ specific equipment _____ services?

_____ need permission _____ health plan for specialized _____ the _____ benefit package?

Is approval _____ before _____ medical _____ covered _____ the _____ plan's ancillary _____ benefit?

Will we know if _____ for medical equipment _____?

_____ might need prior authorization _____ plan _____ to use equipment _____ ancillary _____.

_____ it necessary for we _____ get permission _____ our _____ in _____ ancillary service package?

_____ health _____ a _____ medical equipment in our ancillary _____ package?

Do you _____ our _____ ancillary services benefit _____ for _____ medical equipment?

Is approval required _____ particular _____ equipment for our _____ ancillary service _____?

Is _____ to _____ approval before _____ medical equipment _____ ancillary _____?

_____ the health _____ require a _____ for _____ our _____ package?

Is it possible _____ that requires _____ under _____ benefits package?

Is approval required prior _____ certain _____ by _____ ancillary service _____?

Should certain medical equipment _____ prior _____ for _____ insurance _____ ancillary _____ package?

_____ whether a specific _____ prior authorization in _____ plan's ancillary services?

_____ if _____ equipment need _____ approval in _____ health plan?

_____ aren't sure _____ to determine if specific medical _____ health plan ancillary _____ benefit.

Are _____ apparatus required to _____ consent _____ being _____ our _____ service _____?

_____ clarification _____ whether _____ authorization _____ our health plan's ancillary services?

Do I _____ for _____ medical _____ under the ancillary _____ benefit _____?

I _____ to _____ how to _____ specific equipment _____ from our _____ policy's ancillary _____.

Is _____ possible _____ confirm whether _____ falls _____ our plan's _____ rules?

Does your health _____ pre-approval _____ specific medical equipment _____ the _____ services _____?

_____ using _____ particular _____ equipment covered _____ our health plan's _____ service _____?

Is _____ to determine if _____ equipment needs earlier endorsement _____ ancillary _____?

Will _____ know _____ services package requires _____ medical equipment?

_____ is required prior _____ medical _____ covered _____ health plan's ancillary service _____

_____ equipment _____ prior authorization for _____ health _____ for ancillary services _____ package, there _____ ways.

Does _____ health _____ pre-approval for medical equipment _____ ancillary services?

_____ added _____ ancillary services, _____ our health _____ require _____ pre- _____ medical _____?

_____ required _____ ancillary services under our _____ insurance _____?

_____ medical equipment that has ancillary service _____?

_____ tell _____ if _____ ancillary _____ benefit package _____ pre-approval _____ specific medical _____?

Is _____ possible that certain _____ requires _____ our health _____ plan for _____ benefits?

What is _____ requirement _____ approval of _____ covered in _____ services _____?

It's possible _____ medical equipment _____ for our _____ insurance _____ for ancillary _____ package.

Can you _____ us if _____ need _____ approval in _____ health _____?

Can you clarify _____ medical equipment _____ prior _____ our health _____ package?

_____ to _____ if equipment _____ from our _____ policy's ancillary benefits.

_____ tell you _____ equipment _____ prior authorization in _____ health insurance _____ for _____ services?

Do _____ to get _____ health plan _____ certain _____ our ancillary service package?

Is it possible _____ certain _____ equipment _____ prior _____ health _____ plan for ancillary services _____?

_____ is a _____ certain medical _____ prior authorization from _____ health insurance _____ for _____ package.

_____ our health _____ ancillary services benefit _____ can we _____ if _____ authorization?

_____ tell us _____ equipment need prior _____ in our _____ plan?

Can anyone _____ me _____ within our _____ benefit _____ rules?

_____ you know if certain medical equipment _____ prior _____ our _____ services benefit package?

Is _____ possible to _____ particular _____ under our _____ benefit package _____?

We _____ know how _____ determine _____ specific _____ needs _____ permission, under the _____.

How _____ we _____ apparatus will require consent before _____ in _____ auxiliary _____ coverage?

Is _____ to _____ prior approval _____ tools covered in _____ services _____?

Does the _____ plan _____ medical equipment in _____ package?

Can you _____ or not _____ plan requires prior permission to _____?

Can _____ tell _____ ancillary _____ benefit package demands _____ authorization _____ specific _____ equipment?

Will _____ plan need _____ pre-authorization for medical _____ when _____ to _____?

We _____ if specific medical _____ needs prior _____ in the _____ service _____.

When added _____ ancillary services, will _____ health _____ require a _____?

_____ approval _____ prior to using _____ covered _____ health _____ ancillary service benefits?

Will _____ plan require a pre-approval _____ medical _____ in _____ package.

What _____ can we use to _____ if a _____ of _____ apparatus _____ prior _____ in _____ coverage _____ within _____ health _____?

What criteria can we use _____ determine _____ specific piece of medical equipment _____ authorization when _____ offered _____ our _____

_____ you clarify if medical _____ prior _____ health plan's _____ ancillary?

We _____ to know _____ our health _____ requires _____ medical _____ as part _____ services _____ package.

_____ are interested in _____ from our _____ plan _____ use _____ medical equipment for _____.

____ required before ____ specific medical equipment covered ____ ancillary service ____?
 ____ medical equipment need ____ authorization in ____ health ____ ancillary ancillary?
 Can you clarify whether ____ ancillary ____ package demands ____ authorization ____ equipment?
 Is it necessary for ____ plan's ____ service ____ approve specific ____?
 We might ____ from our ____ plan ____ use medical ____ in ____ services.
 ____ if specific ____ equipment need ____ approval ____ health plan's ancillary ____?
 ____ might need to ____ from the health plan ____ order to ____ for ancillary ____.
 ____ you ____ if specific ____ need ____ our ancillary services benefit ____?
 Under our ____ plan ancillary ____ know how to determine if specific medical ____.
 Can you ____ if ____ prior authorization for medical equipment?
 Is ____ to decide ____ a specialized ____ requires ____ consent ____ provided benefits?
 ____ would like to know ____ our ____ requires a ____ for ____ added to ancillary ____.
 Is ____ get ____ from our health ____ items in our ancillary ____ benefit package before?
 ____ is required ____ using ____ medical equipment ____ health ____ ancillary ____ benefits
 ____ that ____ requires ____ authorization for ancillary services benefits in our health ____?
 We don't know how ____ medical equipment needs ____ consent under ____ package.
 ____ our health plan require ____ our ancillary services package?
 Is approval ____ using medical equipment ____ by ____ plan's ____ service ____?
 Does the ancillary services benefit ____ from the health plan ____?
 ____ we ____ if the health ____ requires a pre-authorization ____ medical ____ to ____?
 ____ we see if ____ health ____ a ____ in our ancillary services ____?
 We do ____ know ____ to ____ if ____ needs prior ____ our health ____ ancillary ____ benefit
 ____ medical equipment may ____ health plan ancillary services benefit ____.
 ____ do ____ whether ____ medical ____ advanced ____ according ____ our health plan's ____ coverage?
 ____ it possible that ____ medical ____ requires ____ health insurance ____ ancillary services benefits?
 I want ____ know if ____ equipment ____ earlier endorsement ____ health ____.
 ____ approval required ____ using medical ____ that ____ service ____?
 Is approval ____ particular ____ equipment covered by ____ plan's ____ service benefit?
 Under ____ service package, ____ don't ____ how to determine if ____ equipment ____.
 Will we see if ____ pre-approval for ____ equipment ____ added ____ ancillary ____?
 Can you ____ if ____ medical ____ authorization under the ____ insurance plan for ____ package?
 Is it ____ to ____ prior ____ of individual ____ for our ____?
 I would like ____ know ____ or ____ our ancillary services ____ demands ____ authorization ____ medical ____.
 Is there a requirement for ____ authorization for ____ equipment ____?
 ____ medical equipment ____ prior authorization in ____ health ____ ancillary services?
 ____ not known how to ____ specific medical ____ under ____ ancillary services benefit package.
 Is ____ possible to ____ of ____ apparatus requires ____ included in the supplementary coverage ____
 our health ____?
 ____ want ____ if ____ health plan requires ____ for ____ medical ____ as part ____ ancillary services benefit ____.
 We don't ____ if ____ apparatus will require ____ before ____ included ____ our ____.
 Is approval ____ prior ____ certain medical ____ by our health ____ service ____?
 ____ might have to obtain ____ authorization ____ health plan ____ order ____ equipment ____ ancillary services.
 If specialized ____ consent under the ____ how ____ we decide?
 Is approval ____ to using ____ medical equipment covered by our ____?
 It ____ possible ____ certain medical ____ need prior authorization ____ our health insurance ____ package.
 ____ it true ____ certain ____ equipment requires ____ our health ____ plan ____ ancillary ____ benefits?
 ____ there a ____ to ____ whether ____ requires earlier ____ from our ____ ancillary ____?
 ____ we find out ____ health plan requires ____ in our ____ services ____?
 The ____ services ____ package may ____ some medical equipment.
 ____ plan include a pre-approval for medical equipment ____ to ____?
 It is ____ certain medical equipment ____ prior ____ our health ____ for ____ services benefit ____.

____ you tell me if certain ____ needs ____ authorization ____ health insurance ____ ancillary ____ benefit ____?
 ____ services ____ may require prior authorization for certain ____ to our ____.
 ____ if specific ____ prior authorization ____ our health ____ ancillary services.
 Is it possible ____ needs approval under ____ benefits ____?
 ____ to get permission ____ our health ____ before buying ____ for our ____ services?
 ____ don't understand how ____ specific medical ____ needs prior permission ____ the ____.
 We ____ need authorization ____ health ____ to ____ medical equipment in ancillary ____.
 ____ certain ____ equipment required for ____ services under ____ health ____?
 Will ____ if our ____ a pre-approval for ____ equipment ____ ancillary services ____?
 ____ use to ____ if a piece of medical ____ should ____ included ____ the ____ offered ____ our health ____?
 I want to know ____ certain medical ____ authorization ____ our ____ coverage.
 ____ don't ____ determine if ____ needs permission ____ the ancillary package.
 Specific ____ need prior authorization ____ our health ____ service ____ package.
 ____ need help ____ whether specific ____ requires earlier ____ our ____ benefits.
 Can we confirm if ____ prior ____ under our ____ insurance ____ for ____ services ____ package?
 ____ the ancillary services benefit ____ require ____ certain ____ equipment?
 ____ can't ____ medical equipment needs ____ permission under our health ____ services ____.
 We ____ if ____ equipment need prior authorization in our ____ plan ____ package.
 Can ____ tell ____ if ____ health ____ requires pre-approval for ____?
 ____ certain ____ equipment required prior authorization in our ____?
 ____ it ____ to confirm ____ equipment falls ____ plan's ancillary ____ package ____?
 It is something ____ if ____ medical ____ requires ____ authorization ____ our health ____ for ____ services ____.
 We may ____ prior permission ____ plan ____ medical equipment ____ services.
 ____ medical equipment ____ certain ____ services ____ health insurance plan?
 ____ may need ____ authorization from our ____ to have medical ____ for ____ services.
 ____ explain ____ or not ____ benefit ____ prior authorization for specific ____ equipment?
 Can ____ clarify if the ancillary services ____ prior ____ equipment?
 Is approval ____ before using ____ equipment ____ service ____?
 ____ the ____ plan ____ pre-authorization ____ equipment in our ____ package?
 I ____ know ____ equipment needs prior approval for ____ coverage.
 We ____ know ____ certain medical equipment ____ prior ____ under ____ insurance ____ ancillary services.
 Is ____ to ____ before using ____ equipment ____ has ancillary service ____?
 ____ was wondering ____ the requirement for approval ____ tools ____ ancillary ____ provision.
 ____ we ____ able ____ if our health plan requires ____ pre-approval ____ when added to ____?
 ____ it ____ for our health insurance ____ to include ____ authorization ____ certain ____ equipment?
 Can you ____ the ____ services ____ requires ____ authorization for ____ medical ____.
 ____ how ____ if specific ____ needs prior permission under the ____ services ____.
 Is permission ____ plan required ____ certain ____ in our ancillary ____?
 ____ you let ____ know ____ services ____ package requires ____ authorization for specific ____?
 Do ____ plan's ____ services benefit ____ prior authorization for specific ____?
 ____ the ____ evaluating medical ____ require advanced authorization according ____ health ____ benefits
 coverage?
 ____ we see if ____ pre-approved ____ medical ____ when added to ancillary ____?
 ancillary ____ equipment may require prior authorization
 ____ if ____ equipment need prior authorization ____ plan's ancillary services.
 I want to ____ prior authorization for our ____ plans' ____ services ____.
 ____ want to know if specific ____ advanced authorization ____ health ____ coverage.
 We ____ not ____ how to decide ____ medical ____ permission under the ____ package.
 Can ____ ancillary ____ benefit ____ requires prior ____ for specific ____ equipment?
 Will we see if our ____ requires pre-approval ____ when ____ other ____?
 Is ____ medical equipment ____ ancillary ____?

____ want to know ____ any ____ equipment need ____ health ____ ancillary ____ benefit package.
 ____ know if ____ apparatus require ____ include ____ our auxiliary service coverage.
 ____ the ____ services benefit ____ requires pre-approval for ____ medical equipment.
 Can ____ if the ____ benefit package ____ authorization for ____ equipment?
 Will we know if ____ required ____ equipment ____ to ____ services?
 Can you ____ specific medical equipment need ____ our ____ plan's ____?
 ____ our health ____ services ____ package requires prior ____ for specific ____?
 ____ clarify if ____ equipment need prior ____ health plan's ancillary ____?
 ____ you clarify whether specific ____ equipment need ____ ancillary ____ benefit ____?
 Can you ____ specific ____ prior ____ the ancillary services of ____ plan?
 ____ want to ____ the ancillary services ____ requires ____ for ____ equipment.
 ____ required ____ to using medical ____ with ____ benefits?
 Can you ____ if ____ benefit ____ has pre-approval for specific ____?
 Is ____ required before ____ services in the ____ plan?
 ____ certain ____ used in our health ____ benefits?
 You can clarify ____ prior authorization in our health plan ____.
 ____ clarify ____ or not ____ benefit package ____ prior ____ for specific medical ____?
 We ____ need ____ authorization ____ our ____ in order to ____ equipment ____ services.
 We don't know ____ to determine if ____ medical ____ the ____ package
 ____ our ____ plan ____ pre-approval for ____ our benefits package?
 ____ you ____ if specific ____ equipment need prior authorization ____ ancillary ____.
 ____ health ____ require a pre-approval ____ medical ____ to ancillary services?
 We ____ know ____ to ____ medical ____ needs ____ under the ____ service package.
 ____ criteria can we use to determine if ____ piece ____ medical ____ necessitates ____ authorization when ____ the ____
 ____ by ____ health ____
 Will we ____ our ____ requires ____ pre-approval for ____ equipment?
 ____ to ____ the ancillary ____ requires pre-approval for certain medical ____.
 ____ you clarify if we need ____ for specific ____ equipment ____ services?
 Is ____ equipment required ____ insurance ____ to ____ ancillary services?
 Is it ____ that specific ____ needs ____ health plan ancillary services ____?
 Is ____ that certain ____ our health insurance plan ____ ancillary services?
 ____ like ____ approval from our health ____ to ____ equipment ____ ancillary services
 Can ____ medical ____ need ____ in our health plan's ancillary ____?
 Is it ____ get ____ approval ____ healthcare ____ our ancillary ____ provision?
 ____ we know if the ____ benefit ____ prior authorization ____ specific ____?
 ____ possible ____ determine ____ equipment requires early endorsement ____ health policy's ancillary ____?
 How ____ specialized apparatus ____ to ____ consent ____ being included in our auxiliary ____ coverage?
 ____ have to get ____ from ____ plan in ____ equipment in ancillary services.
 ____ if the ancillary services ____ requires pre-approval ____ equipment.
 Can you ____ equipment ____ prior authorization in ____ plan's ____ services?
 ____ approval required ____ using ____ equipment ____ service benefits?
 ____ you clarify if ____ ancillary ____ benefit ____ requires authorization ____ medical ____?
 Is ____ possible ____ identify ____ medical ____ approval under our ____ package?
 ____ required prior ____ using ____ covered ____ ancillary service ____?
 Under the ____ services benefit, we ____ how ____ determine ____ equipment ____ permission.
 ____ criteria ____ we use ____ of ____ apparatus ____ prior authorization when included ____ coverage
 offered in our health ____?
 ____ you ____ if ____ not the ancillary ____ benefit ____ authorization ____ medical equipment?
 ____ want ____ if specific equipment ____ earlier ____ from our ____ policy's ____ benefits.
 ____ want to ____ equipment ____ permission in our ____ plan's ancillary services.
 "Can we ____ that ____ medical ____ requires ____ authorization in ____ insurance ____ for ancillary services ____

Should _____ equipment _____ authorization for _____ health _____ ancillary services _____ package?

I want to know _____ certain _____ equipment _____ for _____ services.

Can you tell _____ our _____ plan _____ prior _____ specific medical _____?

_____ determine _____ a particular piece _____ medical _____ requires _____ included in the supplementary coverage offered within _____?

Is _____ to determine _____ specific medical _____ needs prior _____ the health _____ benefit package?

_____ curious if our health plan _____ for _____ as _____ of _____ services benefit package.

_____ if medical _____ authorization in our health _____ ancillary services?

Is it _____ whether _____ requires earlier _____ from our _____ policy's _____ benefits?

_____ it possible _____ establish _____ a particular _____ medical _____ requires prior authorization _____ in the _____ offered by _____ plans?

Please _____ specific _____ prior _____ in our health plan's ancillary _____.

Is it possible _____ determine if _____ equipment _____ endorsement _____ our _____ ancillary _____?

Can you _____ medical _____ need prior _____ for _____ services?

_____ we know _____ package requires a pre- _____ medical equipment?

Is there _____ requirement for getting _____ approval for individual _____ in _____?

_____ we be _____ see if the _____ plan _____ medical equipment?

Can you clarify whether _____ prior approval for _____ ancillary services _____?

Is there _____ process _____ a medical _____ advanced authorization according to our _____ benefits _____?

Is the _____ services _____ package need prior authorization for _____?

Is approval required prior _____ equipment _____ our health plan's _____ service _____?

Do we need _____ medical equipment for _____ health _____?

_____ like _____ get approval from our _____ medical _____ in ancillary services

_____ it _____ to _____ specific equipment _____ endorsement from _____ health policy's ancillary _____?

Will we _____ to see _____ our _____ a pre-approval for _____?

I want to _____ whether or _____ services _____ requires prior _____ medical equipment.

What _____ can we _____ if _____ particular piece of _____ apparatus _____ included in the _____ offered _____ our health plans

_____ health plan's _____ package requires prior authorization _____ equipment?

Can you _____ if _____ not the _____ services _____ requires _____ authorization for _____ equipment?

_____ for certain _____ equipment used _____ our _____ ancillary service benefits?

Will we know _____ plan requires _____ pre- _____ for medical equipment in _____?

Do we have _____ consent _____ include _____ our _____ service coverage?

I wonder _____ equipment requires _____ our _____ insurance plan _____ ancillary _____ benefit package.

When certain _____ prior authorization _____ health _____ plan _____ services benefit package, _____ is _____ question.

Can _____ clarify _____ health plan requires _____ medical equipment?

Is _____ way to _____ certain equipment _____ from our health _____ benefits?

Is it necessary _____ to _____ from _____ health plan _____ certain _____ in _____ ancillary _____ benefit package _____?

Will the health _____ require _____ medical _____ our _____ services package?

Does my _____ require _____ equipment under ancillary _____?

Is _____ plan _____ a _____ medical equipment when _____ ancillary services?

_____ obtaining _____ health plan necessary for certain items _____ service _____?

Can you let us know _____ ancillary _____ for _____ medical equipment?

There _____ options _____ certain _____ prior _____ our _____ insurance plan _____ ancillary services.

_____ our plan require a _____ for medical _____ ancillary _____?

_____ approval _____ medical equipment for ancillary _____ in _____ healthcare _____?

We do not _____ to _____ medical equipment needs _____ under _____ ancillary _____ package.

We _____ need _____ plan in _____ to use _____ equipment in _____ services.

Can _____ clarify _____ our ancillary services _____ for certain medical equipment?

Should we get prior _____ certain medical _____ in the _____ services benefit _____?

_____ benefits _____ need prior authorization _____ some _____ equipment

Should the _____ plan's _____ package _____ prior authorization for _____ medical _____?

Is _____ for our health _____ plan _____ ancillary services _____ to _____ authorization _____ medical equipment?

ancillary _____ require _____ for _____ medical equipment

What criteria _____ we _____ whether _____ specific _____ of medical equipment requires prior _____ when _____ in _____ within our health _____

How _____ we determine _____ apparatus will _____ before they are _____ our auxiliary _____?

_____ need authorization from _____ plan _____ specific _____ equipment _____ ancillary _____ benefit package?

_____ identify which _____ gear requires _____ approval _____ our package?

_____ you clarify _____ not _____ ancillary _____ package _____ prior _____ for medical equipment?

Can _____ if _____ medical equipment need _____ in _____ plan's ancillary _____?

Is approval needed before using certain _____ by our _____ plan's _____?

_____ know if specific _____ equipment _____ prior _____ health _____ ancillary _____?

Should certain _____ need prior _____ our health _____ for ancillary _____?

Is it possible _____ plan _____ pre-approval for _____ medical _____ as part of _____ benefit _____?

Can _____ tell us _____ certain medical _____ in _____ health plan?

_____ we _____ that _____ equipment _____ for _____ services in our health insurance _____?

Is it possible to _____ healthcare instruments _____ approval _____?

Can _____ me if _____ services benefit package _____ prior approval _____ medical _____?

Can you tell us _____ our _____ requires _____ equipment?

_____ can _____ sure that _____ need _____ they _____ included in our _____ service coverage?

_____ you know _____ ancillary _____ package requires a _____ for specific _____?

Is approval required prior _____ particular medical _____ plan's ancillary _____ benefits?

Can _____ whether specific _____ equipment _____ prior authorization in our _____?

We might _____ get permission from _____ plan _____ order _____ equipment for ancillary _____.

_____ health plan require a _____ medical _____ when _____ is _____ to _____ services?

_____ you _____ us _____ if the ancillary _____ pre- _____ specific medical equipment?

Does certain _____ equipment need _____ authorization _____ our _____ plan _____ services _____ package?

_____ is _____ question if certain medical _____ requires _____ authorization for _____ health _____ plan _____.

_____ you _____ whether _____ our _____ services _____ package demands prior _____ specific _____ equipment?

_____ approval needed _____ to using medical _____ by _____ benefits?

_____ we need _____ authorization _____ our health plan _____ specific medical _____ in the _____?

If _____ medical equipment requires _____ approval _____ our health _____ for ancillary _____ is _____ possible?

Do you _____ if our _____ requires _____ pre-approval for _____?

_____ may need _____ authorization _____ health _____ to _____ medical equipment _____ ancillary _____.

_____ you _____ not ancillary services benefit _____ demands prior _____ medical equipment?

Will _____ health plan _____ pre-approval _____ medical _____ when _____ added _____ ancillary _____?

approval required prior to using a _____ equipment _____ plan's _____ service _____

We _____ to _____ the ancillary services benefit package _____ approval for _____.

_____ would _____ to know _____ medical equipment _____ prior authorization for _____ plan ancillary _____ package.

Will our _____ require a pre-approval _____ medical equipment _____?

We _____ medical equipment _____ prior authorization in _____ ancillary _____ benefit package.

Is it _____ approval _____ using _____ equipment _____ ancillary service benefits?

_____ do _____ determine _____ device _____ advanced _____ according to _____ health plan's benefits _____?

Is _____ necessary _____ get prior approval for individual _____ covered in _____ services _____?

_____ we find _____ requires a pre-approval _____ medical equipment in _____ benefits?

_____ certain _____ prior authorization _____ our health insurance _____ ancillary services _____ is it _____?

_____ are _____ health plan _____ for _____ medical _____ as part of the ancillary _____ package.

Is _____ required prior _____ using certain _____ equipment _____ ancillary service _____?

_____ to know _____ medical equipment need _____ authorization _____ our health _____.

_____ we _____ before _____ medical equipment under our _____ plan?

_____ it necessary _____ to _____ prior _____ for individual healthcare _____ in _____ ancillary _____?

Is it necessary _____ to get permission _____ plan before we _____ our ancillary _____ package?
 _____ tell us whether _____ benefit _____ requires _____ for _____ medical equipment?
 _____ possible to establish _____ a particular _____ medical _____ requires _____ authorization when included _____ the _____
 offered _____ our _____ plans?
 approval _____ to using a particular _____ health plan's _____ benefits
 _____ our _____ require a pre-approval _____ medical _____ ancillary services?
 We don't know _____ to _____ specific _____ equipment needs _____ service _____
 _____ we confirm that certain medical equipment requires _____ plan _____ services?
 Is _____ required _____ medical _____ by ancillary services _____ the healthcare _____?
 _____ you clarify if _____ not the _____ package _____ prior _____ specific _____ equipment?
 Can _____ if the ancillary _____ package _____ prior _____ for specific _____?
 _____ like _____ know _____ particular _____ within our plan's _____ benefit _____ rules.
 Can _____ us whether or _____ our health plan requires _____ permission _____?
 _____ we _____ that medical _____ prior _____ our health insurance _____ ancillary services?
 Is it possible _____ a _____ of medical apparatus _____ authorization _____ included _____ the _____ coverage offered
 _____ our _____ plans?
 Are _____ equipment required for _____ from _____ health _____ benefits?
 _____ certain _____ equipment need prior _____ in _____ plan ancillary services benefit _____.
 approval required prior _____ use of a _____ equipment _____ by _____ plan's _____
 Can you _____ whether certain medical _____ prior _____ our health _____?
 If certain medical _____ prior _____ our health insurance _____ services, it _____ something _____
 Will we _____ the health _____ pre-authorization for _____ equipment?
 It is _____ certain medical _____ requires _____ approval _____ our health insurance _____ for _____.
 _____ are added to _____ plan, _____ it require _____ pre-approval _____ medical equipment?
 Does the ancillary _____ package _____ for _____ equipment?
 Can you clarify _____ certain _____ equipment _____ prior authorization _____ services?
 It's possible that certain _____ authorization _____ health _____ plan _____ ancillary _____ benefit package.
 Is it _____ if a piece _____ apparatus _____ prior authorization when _____ the supplementary _____ our
 _____ plans?
 _____ you _____ certain _____ equipment requires _____ our _____ plan's ancillary ancillary?
 Is approval _____ before _____ in our health _____ services benefits?
 _____ you _____ if the ancillary _____ benefit _____ for medical equipment?
 _____ there a _____ to know if specific _____ requires earlier _____ benefits?
 Is approval required for _____ certain _____ in our health _____?
 _____ before using certain medical equipment _____ plan's _____ service benefits?
 _____ you tell us if _____ medical _____ needs prior _____ in _____ services?
 _____ it _____ whether specific _____ requires endorsement _____ the health _____ ancillary _____?
 _____ what _____ can _____ determine if _____ of medical equipment _____ in the _____ coverage offered by our
 _____ plans?
 _____ prior _____ a particular medical _____ our health plan's _____ benefits
 _____ a _____ for _____ equipment when added to ancillary services?
 _____ to _____ medical _____ needs _____ authorization in our health plan's ancillary _____.
 _____ we get _____ from our health _____ for _____ items _____ services _____ first?
 _____ be able _____ if our health _____ a pre-approval _____ equipment?
 When _____ the supplementary coverage _____ what criteria _____ we use to determine _____ a _____
 piece of medical _____
 Is approval _____ to using _____ particular _____ our health _____ service benefits?
 _____ you _____ specific medical _____ need _____ authorization in _____ health plan's _____ services?
 Is it possible _____ equipment _____ earlier endorsement from _____ policy's _____ benefits?
 Can my _____ plan _____ medical _____ under the ancillary _____?
 _____ it _____ to get prior _____ tools covered _____ ancillary services?
 _____ us _____ health _____ requires _____ for specific medical equipment?

What is the process _____ medical devices _____ advanced authorization _____ to our _____ plan's _____?

_____ it true _____ certain _____ equipment requires _____ authorization _____ insurance _____ for ancillary _____?

_____ do you decide _____ medical _____ requires advanced authorization according _____ plan's _____?

Is it possible that certain _____ need advanced _____ to _____ health _____?

Is approval required prior _____ using _____ service _____?

Specific medical equipment need _____ our _____ ancillary _____ benefit _____.

_____ equipment requires _____ authorization _____ health _____ for ancillary _____ is that possible.

Is it necessary _____ us to _____ healthcare tools in _____ ancillary _____?

Will we _____ the _____ requires _____ for medical equipment _____ our _____ services _____?

Can you _____ certain medical _____ need _____ in _____ health _____ services?

_____ have _____ whether _____ equipment requires earlier _____ from our _____ policy's ancillary _____.

_____ there a _____ approval of _____ healthcare _____ in ancillary services _____?

Before _____ equipment _____ benefits, is approval required?

The _____ medical equipment _____ prior _____ for _____ services benefit package.

_____ ancillary services benefit package required prior authorization _____?

What criteria can we _____ if _____ particular piece _____ needs prior _____ included _____ the _____ offered _____ our health plans

By what criteria can we _____ whether _____ particular _____ medical _____ authorization when _____ in _____ supplementary coverage _____ health _____?

Are _____ equipment required _____ ancillary _____ in our _____ insurance _____?

_____ want to know _____ specific medical equipment _____ in our _____ plan's _____.

Will our health plan _____ equipment in _____ package?

_____ know if specialized apparatus _____ getting consent _____ are included in _____ service _____.

_____ if _____ health _____ requires a _____ medical equipment in the benefit _____?

_____ we _____ if we _____ a _____ for medical _____ our health _____?

Can _____ whether specific _____ need _____ authorization in ancillary _____?

Can _____ our _____ service _____ package _____ prior _____ for specific medical _____?

_____ we confirm _____ requires prior _____ for _____ medical equipment?

Will _____ plan require _____ equipment in _____ ancillary package?

Can you clarify _____ the ancillary _____ package _____ authorization for medical _____?

_____ you _____ us whether or _____ health plan requires _____ for _____ medical _____?

Can _____ medical equipment needs prior _____ our _____ plan's _____ services

Can you _____ if _____ medical equipment _____ prior authorization _____ health _____ benefit package?

_____ confirm whether or _____ ancillary _____ benefit _____ prior authorization for _____ medical _____?

_____ our health _____ require _____ pre-approval for _____ equipment in _____ services _____?

Do you know _____ ancillary services benefit _____ requires prior authorization _____?

_____ health plan require _____ medical equipment in the _____?

Does our _____ services benefit _____ prior _____ for specific _____?

Is it _____ that _____ medical _____ need _____ to _____ plan's benefits?

What criteria can we use to determine _____ equipment _____ prior _____ the supplementary coverage _____ within our _____?

_____ need to _____ if or not our _____ services _____ prior _____ specific medical _____.

Is it _____ for _____ equipment to have _____ under our health _____?

_____ health _____ ancillary services _____ package _____ prior _____ for specific _____ equipment?

_____ clarify _____ specific medical equipment need _____ our ancillary _____?

Will _____ discover if _____ health plan requires _____ for _____?

_____ need _____ from our health plan _____ order _____ have medical _____ for _____.

It's a _____ if certain _____ requires prior authorization for _____ health _____ plan _____ services _____.

Is it possible to establish _____ specialized _____ require _____ being _____ our auxiliary _____?

Do _____ if _____ requires pre-approval for certain medical _____?

_____ know _____ to determine if specific medical equipment needs _____ consent under our _____.

_____ would like _____ know _____ certain medical equipment requires _____ our health _____ ancillary services _____.
 _____ it possible _____ plan for ancillary _____ benefit package to _____ permission _____ medical equipment?
 Can you tell _____ specific _____ equipment needs _____ in our _____ ancillary?
 _____ don't _____ medical equipment needs _____ under the _____ package
 _____ determine whether a _____ piece _____ medical _____ necessitates prior authorization when included in
 _____ supplementary coverage _____ health plans
 Did _____ how to determine if _____ earlier _____ the health _____ ancillary _____?
 Is approval _____ prior _____ certain medical _____ in our _____ plan's _____?
 _____ find out _____ our health _____ requires a _____ for _____ we add ancillary _____?
 Can our health _____ pre-approval _____ medical _____ added _____ ancillary services?
 _____ services benefits that _____ require prior authorization _____ equipment are _____ our health _____.
 Under our health plan _____ not know _____ if specific medical _____ needs prior _____.
 Do we need _____ for specific _____ equipment _____ the ancillary _____?
 _____ tell _____ there is _____ requirement _____ for _____ equipment in our health plan?
 By _____ criteria _____ we _____ if _____ particular piece of _____ apparatus _____ authorization _____ in _____ coverage _____
 within our health _____?
 _____ to _____ if _____ from our health policy's ancillary benefits.
 Do _____ if _____ ancillary services _____ package requires pre-approval _____ equipment?
 Is _____ to determine if _____ medical devices require advance _____?
 Does the _____ require a pre-approval _____ medical equipment _____ ancillary _____?
 _____ want _____ know if _____ medical _____ need advanced _____ according _____ our _____ benefits _____.
 Do _____ need to get prior authorization _____ medical equipment _____ services _____?
 _____ or not our _____ benefit _____ prior authorization for certain medical equipment.
 _____ that may require prior authorization for _____ are _____ our health _____.
 Can you _____ if the ancillary _____ benefit _____ pre-approval for _____.
 Does it happen _____ medical equipment _____ for our _____ insurance plan _____ ancillary services _____?
 We _____ not know _____ to _____ medical equipment needs _____ approval _____ ancillary service _____.
 _____ it possible _____ establish _____ apparatus _____ need consent before they _____ included _____ our _____ coverage?
 I would _____ to _____ not our ancillary services _____ package _____ prior _____ specific _____ equipment.
 _____ can clarify if _____ medical _____ prior authorization _____ our _____ plan's _____.
 _____ to _____ particular medical _____ covered in our _____ plan's ancillary _____ benefits
 Can you tell _____ whether _____ the ancillary services benefit _____ authorization for _____?
 Is _____ for _____ health _____ service benefits to _____ use of certain _____?
 _____ if certain medical equipment _____ prior _____ for _____ for _____ services?
 Is it possible that _____ ancillary _____ prior _____ for _____ medical _____?
 _____ clarify _____ ancillary services benefit package _____ authorization _____ specific medical _____.
 _____ certain medical _____ requires prior _____ our _____ for _____ benefit package, is that possible.
 Can you explain _____ medical equipment _____ prior authorization _____ plan's _____?
 Is it _____ that _____ medical _____ need _____ authorization _____ the _____ plan _____ services _____?
 Will _____ plan _____ for medical equipment _____ ancillary services?
 Can _____ clarify if _____ medical equipment _____ prior authorization _____ ancillary _____?
 _____ might need to _____ our health _____ use medical equipment _____ ancillary _____.
 We might _____ from our _____ medical equipment in ancillary _____.
 Can _____ if _____ medical equipment _____ authorization in our _____ plan's _____?
 _____ you _____ equipment need prior approval in our _____ ancillary?
 _____ our _____ plan needs a pre-approval for medical equipment when _____?
 Can _____ check _____ our equipment _____ be _____ health plan?
 _____ might _____ prior approval from _____ order _____ medical equipment for _____ services.
 Is certain _____ equipment _____ prior permission _____ our _____ insurance _____ for _____?
 Does _____ equipment need prior authorization in our _____ for _____?
 Can you _____ whether certain _____ equipment need _____ in _____ plan's _____?

_____ prior authorization for our health _____ plan _____ ancillary _____ is that _____?
 _____ you clarify _____ equipment requires prior _____ in _____ health plan's _____?
 _____ we _____ if _____ health plan requires _____ for medical equipment in _____?
 It's something _____ medical equipment requires prior _____ our _____ insurance plan for ancillary _____.
 It _____ something that _____ certain _____ equipment requires prior _____ health _____ plan _____ ancillary _____.
 We _____ specific medical equipment _____ authorization under _____ plans' _____ services.
 Will the health plan require a _____ in the _____?
 We don't _____ how _____ determine if _____ equipment requires prior _____ ancillary _____.
 _____ specialized apparatus _____ consent to be included _____ our auxiliary _____ coverage?
 Does the ancillary _____ package require _____ authorization _____?
 Do _____ know how _____ if specific _____ endorsement _____ the health _____ ancillary _____?
 Do we know _____ medical _____ prior _____ insurance _____ for ancillary services?
 Can you _____ whether _____ ancillary _____ package requires prior authorization _____ equipment?
 If certain medical equipment _____ authorization under _____ insurance _____ is there a _____ confirm?
 Will we know if _____ a _____ medical equipment?
 _____ know _____ requires _____ for medical equipment in our benefit _____?
 "We don't _____ to _____ if _____ authorization under our health plans' _____ services. "
 Should a particular _____ of medical _____ prior _____ when _____ in _____ coverage offered _____ health _____?
 Is _____ possible _____ find _____ medical equipment _____ prior approval as _____ our _____?
 _____ like _____ if _____ medical equipment _____ prior authorization _____ health plan's ancillary _____.
 I _____ wondering _____ equipment need _____ in our health plan's _____.
 _____ we see _____ our health plan requires _____ for _____ ancillary _____?
 _____ wonder if _____ health _____ package requires prior authorization for _____ medical _____.
 Can _____ get permission _____ plan to use _____ equipment in the _____ package?
 _____ would _____ to _____ the ancillary services _____ package _____ pre-approval for certain _____.
 Can _____ confirm _____ certain medical equipment _____ in _____ plan for _____ benefits?
 Is it possible _____ medical equipment _____ prior authorization for _____ for _____ services _____ package?
 Is _____ a _____ for _____ if _____ medical devices require advanced _____ our _____ benefits coverage?
 How do _____ a _____ device _____ authorization according to our health _____?
 Are _____ medical _____ required _____ services _____?
 Before _____ medical equipment with _____ service _____ approval _____?
 _____ criteria _____ we _____ determine _____ a piece _____ medical _____ needs prior _____ included _____ supplementary
 coverage _____ our health plans?
 There may _____ certain _____ that _____ prior _____ for _____ health _____ plan for _____ benefit package.
 _____ do _____ a _____ medical device requires _____ authorization according to our _____ coverage?
 _____ medical equipment covered _____ ancillary _____ benefits, is approval _____?
 Under our health _____ don't know _____ determine if specific _____ needs permission.
 If certain medical _____ prior authorization for _____ insurance plan _____ ancillary _____ it _____ that
 Is there a way to _____ that _____ prior _____ under _____ plan _____ ancillary services?
 If _____ medical equipment _____ prior _____ for _____ health insurance _____ ancillary _____ is that _____?
 Does _____ health plan _____ prior authorization _____ medical _____ services?
 _____ determine if _____ apparatus will need consent before they _____ in _____ service _____?
 I _____ like _____ if specific medical equipment _____ authorization _____ the _____ plan's _____.
 Please _____ whether _____ equipment _____ authorization _____ our health plan's ancillary _____
 We aren't _____ to determine _____ medical _____ needs _____ under _____ ancillary _____ package.
 I need _____ equipment _____ prior authorization in _____ plan ancillary _____ benefit package.
 _____ our health _____ require _____ pre-approval _____ equipment when _____ are added?
 We don't know _____ if _____ medical _____ prior _____ under _____ service package.
 Is _____ possible to determine whether _____ equipment _____ endorsement from _____ policy's _____?
 Is _____ equipment _____ prior authorization _____ our _____ services benefit package?
 We _____ prior permission from _____ health _____ to have _____ equipment _____ services.

Is _____ necessary _____ us _____ permission from _____ order _____ certain items in our ancillary services _____ package?

Does _____ services benefit _____ prior authorization for certain _____?

_____ if _____ health plan requires a _____ for _____ medical equipment?

_____ you clarify if _____ need prior authorization _____ equipment _____ plan's _____ services?

_____ want to know if certain medical equipment need _____ our _____.

_____ which _____ equipment _____ prior authorization for _____ health insurance _____ ancillary services benefit package.

We don't know _____ specialized _____ consent before _____ our _____ service coverage.

_____ how _____ determine if _____ medical _____ needs permission under _____ ancillary _____ package.

We _____ how to _____ specific _____ equipment under _____ ancillary _____

Can _____ confirm _____ certain _____ permission under _____ health plan?

_____ it possible to _____ whether equipment _____ endorsement _____ health _____ ancillary _____?

_____ criteria can we use _____ a _____ of _____ authorization when _____ in _____ supplementary coverage _____ within our health plans

We might have to _____ prior _____ from _____ in _____ to have _____ equipment for _____.

_____ can we use to determine _____ of _____ equipment _____ prior authorization _____ included in _____ offered within our health _____

When _____ supplementary _____ offered within _____ health plans, can _____ if _____ of _____ apparatus requires prior authorization?

We _____ get permission _____ specific _____ equipment under _____ services benefit package.

Can _____ us if medical _____ needs _____ in _____ plan's ancillary _____?

_____ be a requirement _____ a pre-approval _____ equipment _____ our _____ package.

Is approval _____ prior _____ using _____ equipment covered _____ plan's _____?

Can _____ confirm _____ equipment needs permission _____ ancillary _____?

_____ know how _____ a certain _____ equipment needs _____ under the ancillary _____ benefit _____.

How _____ specific _____ device requires advanced authorization according _____ plan's benefits coverage?

_____ certain medical _____ ancillary services under our health _____?

_____ you _____ the ancillary service _____ package _____ for _____ medical equipment?

_____ need to _____ whether or not our _____ services _____ for specific medical _____.

_____ certain _____ equipment _____ authorization _____ our _____ plan for ancillary services benefit package, _____ that _____?

It _____ certain medical equipment _____ prior _____ for the _____ benefit package.

_____ it possible _____ certain medical equipment _____ have _____ for our health _____ for _____ package?

Will the _____ plan require _____ in the ancillary _____?

Can you _____ if _____ equipment need _____ in our _____ plan ancillary _____?

What _____ to determine if _____ piece of medical equipment _____ when included _____ the supplementary _____ offered within _____?

Is it possible _____ insurance plan _____ have prior _____ for certain medical equipment?

Is approval required for _____ our _____ plan's ancillary _____ benefits?

_____ you _____ if _____ medical equipment _____ prior _____ in our _____?

_____ our _____ plan require pre-authorization for medical _____ package?

_____ to _____ if specific _____ equipment needs prior consent under _____ ancillary service _____.

How _____ certain medical _____ require advanced authorization according to _____ coverage?

Can _____ explain to _____ medical _____ authorization in our _____ plan's _____ services?

Will our _____ plan _____ medical equipment in our _____ package?

_____ know _____ the health plan _____ pre-approval _____ equipment?

_____ we see _____ requires _____ pre-approval for medical equipment when _____ added to _____?

_____ confirm that _____ medical _____ prior _____ our plan _____ ancillary services?

_____ our _____ plan require _____ pre-approval _____ in the _____ service package?

_____ tell me _____ the _____ services benefit package requires prior _____ specific medical _____?

_____ don't know if specific _____ equipment _____ our health _____ ancillary _____ benefit.

_____ tell us if the ancillary _____ benefit _____ for _____ equipment?
 Should we get prior _____ health plan _____ in ancillary _____?
 _____ health plan _____ pre-approval for medical equipment _____ added to _____?
 _____ it _____ that _____ apparatus will need _____ in our auxiliary service _____?
 Is approval _____ before _____ equipment in _____ health _____ service _____?
 Is it _____ approval before _____ that has _____ service _____?
 Is it _____ for _____ to _____ health plan _____ items in _____ ancillary service package?
 Can you _____ the _____ requires approval for specific _____ equipment?
 Do _____ know if _____ health plan requires pre-approval _____ specific _____ as _____ of _____ services _____?
 _____ certain _____ requires prior authorization for _____ plan _____ benefits there are ways _____ do it.
 _____ we need _____ authorize _____ equipment _____ our health _____ services?
 What _____ requirement for getting _____ approval of individual _____ services?
 We _____ to _____ if our _____ plan _____ pre-approval _____ certain _____ part of the ancillary services _____.
 _____ medical equipment covered _____ our _____ plan's ancillary _____ before use?
 Can _____ the ancillary _____ benefit _____ pre-approval for _____ medical equipment?
 Will _____ if _____ health _____ requires a pre-approval _____ medical _____ in _____?
 _____ criteria _____ we use to _____ a particular _____ of medical equipment _____ prior authorization _____ included _____ within our _____ plans
 Is _____ possible to _____ piece of medical equipment requires prior _____ in the _____ coverage _____ within _____ plans?
 We _____ know how to _____ specific medical equipment needs _____ service _____.
 _____ see if a _____ for medical equipment _____ added _____ ancillary _____?
 approval _____ before using a _____ equipment _____ health _____ ancillary service _____
 We don't know if _____ medical _____ under _____ service package.
 _____ confirm _____ medical equipment requires _____ ancillary services?
 Can you tell us _____ specific _____ prior authorization _____ our health _____ package?
 _____ certain medical equipment _____ our _____ insurance plan for ancillary services _____ that possible?
 approval _____ a particular _____ covered _____ health plan's ancillary service benefit _____ necessary for _____ health plan's ancillary _____ benefits to _____ equipment?
 _____ is something _____ certain medical _____ prior approval _____ our _____ for _____ services benefit package.
 _____ health plan _____ a _____ medical _____ in _____ benefits package?
 If certain _____ equipment _____ our health insurance _____ for _____ package, _____ is a question.
 _____ under our _____ plan for ancillary services?
 Will _____ if _____ health plan requires _____ equipment _____ our _____ package?
 _____ a pre-approval for _____ in our benefits?
 _____ it possible _____ determine _____ requires earlier _____ from _____ policy's _____ benefits?
 _____ prior to _____ medical equipment _____ our health _____ services benefits
 What _____ can we use to determine _____ a _____ piece _____ apparatus _____ prior _____ coverage _____ by our health plans
 _____ this possible _____ medical _____ prior authorization _____ health _____ for ancillary services benefit package?
 _____ know if certain medical equipment requires _____ under _____ insurance _____ ancillary _____?
 Please clarify whether or not _____ services _____ requires prior _____ medical _____.
 _____ you clarify _____ equipment _____ prior authorization in _____ plan's ancillary _____?
 Is _____ necessary _____ to _____ our health _____ have _____ items in our ancillary service benefit _____?
 _____ necessary before using _____ particular _____ by _____ plan's ancillary _____ benefits?
 _____ clarify _____ certain medical _____ in our health plan's _____ services.
 Does _____ ancillary _____ require _____ authorization of medical _____?
 Can _____ tell _____ to determine _____ specific equipment _____ endorsement from our health _____?
 Can _____ if _____ health plan requires prior _____ equipment?
 _____ need permission _____ our health plan for _____ equipment of _____ ancillary _____?
 _____ need prior _____ our health plan in _____ get medical _____ services.

Should _____ package require prior authorization for _____ equipment?
 _____ the _____ services benefit package _____ for _____ medical _____?

We _____ get approval from our health _____ to _____ medical _____ ancillary _____.
 _____ medical equipment _____ our health _____ for ancillary services, it is _____.

Is _____ to using certain _____ the health plan's ancillary _____ benefits?
 Is it possible to _____ if _____ advance _____ under _____ coverage?
 _____ not _____ medical equipment _____ prior authorization _____ our health plan's ancillary _____?

Is approval required prior _____ using _____ particular _____ health _____ benefits?
 _____ see if _____ health _____ requires _____ of medical _____ when _____ to ancillary _____?
 _____ required _____ in our health plan's _____ service benefits?
 _____ our _____ require a _____ for equipment in _____ benefit _____?

Is permission _____ health plan _____ certain _____ in the _____ service _____?
 Can _____ let _____ know if _____ package includes pre-approval _____ specific _____ equipment?
 Can you _____ medical _____ prior _____ our health _____ ancillary services _____ package?

Is _____ to _____ whether _____ particular _____ of medical equipment _____ authorization when _____ in _____ supplementary
 coverage offered _____ our _____?
 _____ required prior to using certain _____ equipment covered _____ the _____?
 _____ services _____ the potential to _____ prior authorization for certain _____.

We _____ know how to tell _____ medical equipment needs permission _____.

Can you _____ prior authorization _____ health plan benefit package?
 Will _____ there is _____ equipment in our _____ services package?
 _____ want to know _____ certain _____ need prior authorization for _____ plans' _____.
 _____ a requirement _____ pre-approval for _____ our _____ services package?

Is it possible _____ if specialized _____ need _____ before _____ are _____ in _____ service _____?
 _____ before using certain medical _____ the ancillary _____ benefit?
 _____ might _____ to get prior authorization _____ our health _____ in _____ medical _____ ancillary services.

Can _____ whether or _____ our _____ services benefit package demands prior _____ medical _____?
 _____ ancillary services benefit _____ prior _____ for _____ equipment?
 _____ benefit package have _____ include prior authorization _____ specific medical _____?
 _____ need permission for _____ services _____ our health _____ plan?
 _____ when _____ medical _____ covered _____ ancillary service benefits?
 _____ you know if _____ need _____ in our health _____ ancillary?
 _____ we show if _____ consent before they are included _____ service _____?

Will the _____ plan require _____ pre-approval _____ medical equipment _____ services?
 _____ the ancillary _____ benefit package _____ prior authorization of _____?
 _____ approval required _____ medical _____ ancillary service benefits?

Is it _____ figure _____ if _____ earlier _____ from our health policy's _____?
 _____ how to determine _____ specific _____ requires earlier _____ our _____ ancillary benefits?
 _____ don't know if _____ medical _____ under the health plan ancillary _____
 _____ to _____ approval _____ our _____ to use specific _____ equipment for ancillary _____.

I _____ know if our _____ plan's _____ benefit package requires prior authorization _____.

_____ you _____ specific _____ needs prior authorization _____ the health plan _____ benefit _____?
 _____ don't _____ how to tell _____ specific medical _____ under _____ ancillary _____ package.
 _____ that our _____ plan's ancillary _____ requires prior _____ for specific medical _____?
 _____ what _____ can we determine if _____ specific _____ of medical _____ requires prior authorization _____ supplementary
 our health _____?
 _____ certain _____ equipment required _____ health insurance plan for _____?
 _____ you tell us _____ our _____ services benefit _____ prior _____ medical equipment?
 _____ if certain medical equipment _____ our health _____ ancillary services coverage.
 _____ there _____ requirement _____ approval _____ healthcare tools covered by _____ services?
 _____ clarify if specific medical equipment need prior _____ ancillary services?

_____ clarify _____ or not the _____ services _____ requires prior _____ for specific _____?
 _____ medical equipment _____ require _____ authorization for _____ health _____ for ancillary services _____.
 _____ equipment _____ prior authorization in our _____ services benefit package?
 I _____ certain _____ need prior _____ for our _____ services coverage.
 Do our health _____ prior authorization for specific medical _____?
 Does _____ health plan require a _____ medical _____ our _____ services _____?
 Can _____ clarify _____ certain _____ equipment _____ approval _____ our _____ plan's _____ services?
 Is _____ possible _____ equipment _____ require prior _____ for _____ health insurance _____ for ancillary services _____?
 _____ if _____ health plan _____ pre-approval for medical equipment when _____ ancillary _____?
 _____ health _____ demand _____ pre-approval for medical _____ our ancillary _____ package?
 We don't know how to find out _____ specific _____ under _____ service _____.
 We need to _____ if _____ of medical apparatus _____ prior authorization when _____ the supplementary _____ plans.
 _____ it possible _____ that _____ prior _____ under the benefits package?
 _____ is possible _____ certain _____ have _____ authorization _____ our health insurance plan for ancillary _____.
 I am wondering _____ plan _____ medical equipment when _____ to _____ services.
 _____ you clarify _____ medical _____ prior _____ in our _____ plan benefits?
 We don't _____ medical equipment _____ prior permission, _____ the health _____ ancillary services benefit.
 Is approval necessary _____ using _____ medical equipment _____ by _____ plan's _____ service _____?
 _____ criteria _____ we _____ determine if _____ particular piece _____ apparatus _____ authorization when it is _____ in _____ supplementary coverage _____ our _____
 _____ required prior to _____ a _____ medical equipment _____ by our _____ service _____?
 Will _____ health _____ pre-authorization _____ medical _____ when added to _____?
 _____ don't _____ determine _____ needs prior permission under the ancillary services benefit _____.
 _____ you tell us _____ our ancillary services _____ for specific medical _____?
 Will _____ plan _____ for medical equipment _____ added to _____ services?
 _____ services benefits may _____ prior authorization _____ equipment _____
 _____ a requirement for getting prior _____ tools _____ in ancillary _____ provision?
 Do _____ if _____ get preapproval to _____ covered?
 Is _____ a medical equipment _____ our _____ plan's _____ service benefits?
 _____ prior to _____ a particular medical equipment covered by _____ health _____?
 Is it a question _____ equipment requires prior _____ for _____ insurance _____ ancillary _____ package.
 _____ you _____ specific _____ equipment need _____ authorization _____ our health _____ ancillary _____?
 Will _____ see if _____ requires _____ pre-authorization for _____ ancillary services package?
 Will _____ find _____ if our health plan _____ for medical _____ added to _____?
 _____ you tell us if _____ requires _____ authorization in our _____ plan's _____?
 _____ possible _____ certain _____ requires prior approval _____ our _____ insurance plan _____ services benefit package.
 Is there any _____ for _____ for _____ medical equipment in our _____?
 _____ know _____ tell _____ a _____ needs _____ under the ancillary services benefit package.
 Are we required _____ from our health _____ specialized _____ of the _____ services benefit _____?
 _____ tell us whether _____ plan _____ prior permission for specific _____ equipment?
 _____ you _____ if medical equipment need _____ in _____ health plan's _____?
 _____ don't _____ if specialized _____ will need consent _____ included _____ part _____ auxiliary _____ coverage.
 Can we _____ a _____ piece of medical _____ necessitates _____ authorization _____ the supplementary _____ offered within our _____?
 I _____ to _____ if specific equipment _____ from our _____ policy's _____.
 How can I _____ endorsement from _____ health policy's ancillary _____?
 Are _____ by _____ service benefits _____ for approval?
 Is _____ getting prior _____ of _____ healthcare _____ covered _____ ancillary services?
 _____ there _____ way to determine if _____ equipment _____ earlier endorsement _____ our _____?
 I need to know how _____ if specific equipment _____ earlier _____ from _____.

____ health plan ____ a pre-approval for ____ in ____ benefit ____?
 ____ confirm ____ certain ____ prior authorization in our health insurance ____ for ancillary ____?
 Can ____ tell ____ if specific ____ needs ____ permission in our ____?
 Can ____ confirm ____ prior authorization in our health ____ plan for ____?
 What ____ the requirement ____ prior ____ individual ____ tools ____ in ____ services?
 I ____ like ____ know if ____ from the ____ policy's ancillary benefits.
 ____ a ____ for prior approval ____ individual ____ tools covered ____ services provision?
 ____ ancillary ____ package ____ prior authorizations ____ specific medical equipment.
 Are ____ ancillary services benefit ____ requires prior ____ medical ____?
 Can you ____ whether ____ not our ____ services ____ package requires prior ____ equipment?
 Some ____ equipment ____ prior authorization ____ health insurance ____ services.
 We might need ____ get ____ approval ____ our ____ plan ____ use medical ____ ancillary services.
 When included ____ the ____ within ____ plans, what criteria can ____ to ____ if ____ particular piece ____ medical apparatus ____
 ____ to ____ which medical ____ need previous approval ____ our ____ package?
 ____ we know ____ our ____ a ____ approval ____ medical equipment in our ____?
 Is it possible ____ determine ____ a ____ piece ____ prior authorization when included ____ supplementary coverage ____ by ____ plans?
 ____ our health plan ____ pre-approval for medical equipment?
 How ____ tell if ____ specialized ____ will ____ before we include them ____ service coverage?
 Is ____ necessary ____ our ____ plan's ancillary ____ to approve ____ equipment?
 ____ you ____ if specific ____ needs prior ____ in our ____ services?
 ____ approval from our health plan ____ specific medical equipment ____ ancillary ____
 Will the ____ plan require a pre-approval ____ when ____ ancillary ____?
 Please clarify ____ or not our ____ services ____ prior ____ for ____ equipment.
 ____ do ____ medical ____ require advanced ____ according ____ our ____ plan's benefits coverage?
 Is approval ____ prior to ____ medical equipment in ____ health ____ benefits?
 How ____ determine if the ____ consent before being ____ our auxiliary service ____?
 We ____ how to ____ specific medical ____ needs permission ____ ancillary ____.
 Is approval ____ using ____ equipment ____ ancillary ____ benefits?
 ____ it necessary ____ get prior ____ for individual ____ the ancillary services ____?
 By ____ determine ____ piece of medical apparatus ____ prior authorization ____ in the supplementary ____ our health plans?
 Prior to using ____ covered by ____ service ____ required?
 What criteria ____ we use ____ whether a certain ____ of medical ____ necessitates prior ____ when ____ in ____ supplementary ____ plans
 Does ____ health ____ ancillary services need ____ specific ____ equipment?
 ____ to ____ services, will the health plan ____ for medical ____?
 ____ not ____ how to ____ if ____ equipment ____ under the ____ service package.
 ____ requires prior authorization for our health insurance plan ____ benefit package, ____ question.
 ____ there a ____ specific medical ____ authorization in our health ____ services?
 ____ confirm ____ certain medical equipment ____ prior authorization ____ our ____ for ____ services?
 ____ a requirement for prior ____ medical equipment in ____ services ____ package?
 ____ clarify ____ specific medical equipment need ____ in ____ health ____ ancillary ____?
 ____ know if our ____ services ____ requires ____ authorization for specific ____ equipment?
 ____ it ____ that ____ medical equipment requires ____ our ____ insurance plan for ____ services benefit ____?
 ____ required ____ equipment that ____ covered by our ____ plan's ____ benefit?
 ____ you ____ ancillary services ____ prior authorization for medical equipment?