

## [Demo] NLP Dataset for Customer Service Automation

<b>Company Type</b>	Health Insurance Companies
<b>Inquiry Category</b>	Explanation of benefits (EOB) clarifications
<b>Inquiry Sub-Category</b>	Pre-Authorization Inquiry
<b>Description</b>	Customers seek clarification on the pre-authorization process and whether certain services require prior approval.
<b>Data Size</b>	5,003 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.)**

What \_\_\_\_\_ treatment without pre-authorization and it \_\_\_\_\_ out \_\_\_\_\_ a covered \_\_\_\_\_ under my \_\_\_\_\_?

Will my \_\_\_\_\_ a service \_\_\_\_\_ pre-approval?

What if \_\_\_\_\_ get \_\_\_\_\_ that \_\_\_\_\_ on my \_\_\_\_\_.

If I \_\_\_\_\_ a procedure without my \_\_\_\_\_ but it's \_\_\_\_\_ what am \_\_\_\_\_ do?

\_\_\_\_\_ I'm treated before receiving authorization but it's \_\_\_\_\_ a \_\_\_\_\_?

If there's \_\_\_\_\_ and still have it covered?

Is it \_\_\_\_\_ that \_\_\_\_\_ get treated without \_\_\_\_\_ find out \_\_\_\_\_ plan \_\_\_\_\_?

What will \_\_\_\_\_ to \_\_\_\_\_ is not authorized \_\_\_\_\_ is \_\_\_\_\_?

\_\_\_\_\_ I get treatment \_\_\_\_\_ pre-authorization \_\_\_\_\_ out to be \_\_\_\_\_ my plan, what \_\_\_\_\_?

Does \_\_\_\_\_ cover the cost of \_\_\_\_\_ I do \_\_\_\_\_ get \_\_\_\_\_?

\_\_\_\_\_ no pre-authorization, can \_\_\_\_\_ treatment \_\_\_\_\_ it covered?

\_\_\_\_\_ the \_\_\_\_\_ still \_\_\_\_\_ by my policy \_\_\_\_\_ it \_\_\_\_\_ pre-approval?

\_\_\_\_\_ receiving \_\_\_\_\_ procedure \_\_\_\_\_ pre-approval \_\_\_\_\_ my insurance?

\_\_\_\_\_ it's listed \_\_\_\_\_ a \_\_\_\_\_ on \_\_\_\_\_ plan \_\_\_\_\_ I'm treated before getting \_\_\_\_\_?

I'm wondering if \_\_\_\_\_ treatment \_\_\_\_\_ I haven't \_\_\_\_\_ pre-authorization \_\_\_\_\_.

If I don't \_\_\_\_\_ treatment \_\_\_\_\_ in my plan?

\_\_\_\_\_ my \_\_\_\_\_ still cover treatment \_\_\_\_\_ skip \_\_\_\_\_?

\_\_\_\_\_ can happen \_\_\_\_\_ treatment \_\_\_\_\_ covered by \_\_\_\_\_ plan?

\_\_\_\_\_ I don't \_\_\_\_\_ pre-authorization, \_\_\_\_\_ I covered \_\_\_\_\_?

If I do \_\_\_\_\_ pre-authorization first will I \_\_\_\_\_?

\_\_\_\_\_ do I do when I \_\_\_\_\_ require \_\_\_\_\_ approval?

I would like to \_\_\_\_\_ plan actually \_\_\_\_\_ it if \_\_\_\_\_ without \_\_\_\_\_.

\_\_\_\_\_ the \_\_\_\_\_ was not \_\_\_\_\_ by \_\_\_\_\_ plan, \_\_\_\_\_ I \_\_\_\_\_ coverage?

\_\_\_\_\_ I skip \_\_\_\_\_ will my \_\_\_\_\_ cover \_\_\_\_\_?

Does my \_\_\_\_\_ cover \_\_\_\_\_ I \_\_\_\_\_ get prior \_\_\_\_\_?

Will an \_\_\_\_\_ still be \_\_\_\_\_ it's \_\_\_\_\_ before \_\_\_\_\_ is \_\_\_\_\_?

What \_\_\_\_\_ I \_\_\_\_\_ about \_\_\_\_\_ service \_\_\_\_\_ I \_\_\_\_\_ does \_\_\_\_\_ need prior approval?

If \_\_\_\_\_ procedure without approval \_\_\_\_\_ it's \_\_\_\_\_ plan's \_\_\_\_\_ what would I \_\_\_\_\_?

\_\_\_\_\_ treated before \_\_\_\_\_ but \_\_\_\_\_ is listed as a benefit \_\_\_\_\_ my \_\_\_\_\_ what \_\_\_\_\_ happen?

Even \_\_\_\_\_ treatment \_\_\_\_\_ not \_\_\_\_\_ by \_\_\_\_\_ plan, can \_\_\_\_\_ coverage?

If \_\_\_\_\_ receiving authorization but \_\_\_\_\_ is \_\_\_\_\_ on \_\_\_\_\_ plan, \_\_\_\_\_ happens?  
 \_\_\_\_\_ a medical procedure \_\_\_\_\_ a \_\_\_\_\_ one affect \_\_\_\_\_ coverage?  
 \_\_\_\_\_ treatment \_\_\_\_\_ turns out \_\_\_\_\_ be \_\_\_\_\_ covered service under \_\_\_\_\_ plan, \_\_\_\_\_ should \_\_\_\_\_ do?  
 What \_\_\_\_\_ unauthorized treatment \_\_\_\_\_ is covered \_\_\_\_\_ plan?  
 What are \_\_\_\_\_ of unauthorized treatment \_\_\_\_\_ by my \_\_\_\_\_?  
 \_\_\_\_\_ I get treatment \_\_\_\_\_ it's \_\_\_\_\_?  
 \_\_\_\_\_ will \_\_\_\_\_ if \_\_\_\_\_ is \_\_\_\_\_ authorized \_\_\_\_\_ covered by insurance?  
 \_\_\_\_\_ if \_\_\_\_\_ treatment is \_\_\_\_\_ my plan?  
 \_\_\_\_\_ my \_\_\_\_\_ insurance \_\_\_\_\_ me \_\_\_\_\_ I receive \_\_\_\_\_ without prior \_\_\_\_\_?  
 \_\_\_\_\_ happens \_\_\_\_\_ get treatment without \_\_\_\_\_ and discover it \_\_\_\_\_?  
 \_\_\_\_\_ my \_\_\_\_\_ services without \_\_\_\_\_?  
 \_\_\_\_\_ happen \_\_\_\_\_ me \_\_\_\_\_ isn't authorized but \_\_\_\_\_ covered?  
 \_\_\_\_\_ my \_\_\_\_\_ insurance \_\_\_\_\_ me if \_\_\_\_\_ have prior \_\_\_\_\_?  
 \_\_\_\_\_ I be \_\_\_\_\_ my treatment \_\_\_\_\_ don't \_\_\_\_\_ Pre-authorization first?  
 If \_\_\_\_\_ get treatment \_\_\_\_\_ and \_\_\_\_\_ turns \_\_\_\_\_ to be \_\_\_\_\_ what \_\_\_\_\_?  
 \_\_\_\_\_ happens when \_\_\_\_\_ is \_\_\_\_\_ in \_\_\_\_\_ plan?  
 If \_\_\_\_\_ treated without permission \_\_\_\_\_ out \_\_\_\_\_ plan \_\_\_\_\_ what then?  
 What happens if there \_\_\_\_\_ by my \_\_\_\_\_.  
 \_\_\_\_\_ procedure \_\_\_\_\_ consent but it's within my plan's coverage, what \_\_\_\_\_?  
 \_\_\_\_\_ happens when \_\_\_\_\_ get treatment without \_\_\_\_\_ a covered service?  
 \_\_\_\_\_ I \_\_\_\_\_ be eligible \_\_\_\_\_ if \_\_\_\_\_ is \_\_\_\_\_ for my treatment?  
 \_\_\_\_\_ treatment without prior \_\_\_\_\_ does \_\_\_\_\_ still cover it?  
 \_\_\_\_\_ happens to my coverage \_\_\_\_\_ a service that isn't \_\_\_\_\_ is included \_\_\_\_\_ benefits?  
 \_\_\_\_\_ happens if \_\_\_\_\_ yet, \_\_\_\_\_ covered by my policy?  
 \_\_\_\_\_ I in \_\_\_\_\_ if \_\_\_\_\_ undergo \_\_\_\_\_ procedure without approval \_\_\_\_\_ my plan?  
 So, what if \_\_\_\_\_ get treated \_\_\_\_\_ permission \_\_\_\_\_ out \_\_\_\_\_ covers \_\_\_\_\_?  
 Will \_\_\_\_\_ still \_\_\_\_\_ covered if an \_\_\_\_\_ service \_\_\_\_\_ pre-authorization?  
 \_\_\_\_\_ will happen \_\_\_\_\_ my \_\_\_\_\_ covers \_\_\_\_\_?  
 What happens \_\_\_\_\_ treatment isn't \_\_\_\_\_ but is \_\_\_\_\_?  
 \_\_\_\_\_ am I \_\_\_\_\_ to \_\_\_\_\_ I get \_\_\_\_\_ procedure \_\_\_\_\_ approval \_\_\_\_\_ it's covered \_\_\_\_\_ my \_\_\_\_\_?  
 \_\_\_\_\_ still pay \_\_\_\_\_ I \_\_\_\_\_ preauthorization?  
 \_\_\_\_\_ happen \_\_\_\_\_ if my \_\_\_\_\_ isn't authorized \_\_\_\_\_ falls under \_\_\_\_\_?  
 \_\_\_\_\_ I going \_\_\_\_\_ if \_\_\_\_\_ undergo \_\_\_\_\_ procedure without approval but discover \_\_\_\_\_ plan's coverage?  
 Will my \_\_\_\_\_ a medical \_\_\_\_\_ that is \_\_\_\_\_?  
 \_\_\_\_\_ do \_\_\_\_\_ the covered service when I get \_\_\_\_\_ doesn't require \_\_\_\_\_?  
 \_\_\_\_\_ the service be paid by \_\_\_\_\_ policy \_\_\_\_\_ pre-approval?  
 \_\_\_\_\_ that is \_\_\_\_\_ by my plan, \_\_\_\_\_?  
 \_\_\_\_\_ I \_\_\_\_\_ treated without \_\_\_\_\_ and \_\_\_\_\_ my plan \_\_\_\_\_ it?  
 If a \_\_\_\_\_ approval is \_\_\_\_\_ coverage, what \_\_\_\_\_ I \_\_\_\_\_?  
 If \_\_\_\_\_ get treatment and have it \_\_\_\_\_?  
 \_\_\_\_\_ would \_\_\_\_\_ if treatment isn't authorized but \_\_\_\_\_ insurance?  
 \_\_\_\_\_ don't get \_\_\_\_\_ first, \_\_\_\_\_ I be \_\_\_\_\_ treatment?  
 \_\_\_\_\_ get \_\_\_\_\_ and \_\_\_\_\_ out to be covered \_\_\_\_\_ my plan, \_\_\_\_\_ will \_\_\_\_\_?  
 What \_\_\_\_\_ after an \_\_\_\_\_ covered?  
 \_\_\_\_\_ me to get \_\_\_\_\_ and still have my \_\_\_\_\_ pay for \_\_\_\_\_?  
 If \_\_\_\_\_ get \_\_\_\_\_ without pre-authorization, it becomes a \_\_\_\_\_.  
 If it's \_\_\_\_\_ a benefit \_\_\_\_\_ plan, what happens \_\_\_\_\_ I'm \_\_\_\_\_ getting \_\_\_\_\_?  
 Will \_\_\_\_\_ if I \_\_\_\_\_ get pre-authorization first?  
 \_\_\_\_\_ if I get \_\_\_\_\_ that \_\_\_\_\_ by my plan \_\_\_\_\_?  
 What \_\_\_\_\_ if \_\_\_\_\_ isn't \_\_\_\_\_ yet \_\_\_\_\_ covered \_\_\_\_\_ policy?

Is my \_\_\_\_\_ covered \_\_\_\_\_ skip \_\_\_\_\_?

Will \_\_\_\_\_ be \_\_\_\_\_ policy \_\_\_\_\_ it is not pre-approved?

\_\_\_\_\_ the service \_\_\_\_\_ it's performed before \_\_\_\_\_ is done?

Can I \_\_\_\_\_ treatment paid for under my \_\_\_\_\_ if \_\_\_\_\_?

\_\_\_\_\_ get \_\_\_\_\_ covered, what would happen?

If I \_\_\_\_\_ my plan still \_\_\_\_\_?

\_\_\_\_\_ a service \_\_\_\_\_ be \_\_\_\_\_ by \_\_\_\_\_ policy \_\_\_\_\_ is \_\_\_\_\_ pre-approved?

If it \_\_\_\_\_ listed \_\_\_\_\_ my \_\_\_\_\_ a \_\_\_\_\_ what happens \_\_\_\_\_ I am treated \_\_\_\_\_?

\_\_\_\_\_ there \_\_\_\_\_ when I \_\_\_\_\_ a covered service \_\_\_\_\_ a \_\_\_\_\_?

Is the \_\_\_\_\_ policy when it isn't \_\_\_\_\_?

Would \_\_\_\_\_ covered \_\_\_\_\_ treatment \_\_\_\_\_ I didn't get pre-authorization \_\_\_\_\_?

\_\_\_\_\_ does happen \_\_\_\_\_ an \_\_\_\_\_ covered?

\_\_\_\_\_ an unsanctioned procedure \_\_\_\_\_ coverage?

What happens when I \_\_\_\_\_ it was \_\_\_\_\_?

\_\_\_\_\_ if \_\_\_\_\_ get \_\_\_\_\_ without permission \_\_\_\_\_ my plan \_\_\_\_\_ actually \_\_\_\_\_?

\_\_\_\_\_ wondering \_\_\_\_\_ I'll \_\_\_\_\_ for treatment \_\_\_\_\_ I \_\_\_\_\_ get pre-authorization \_\_\_\_\_.

Does \_\_\_\_\_ that were \_\_\_\_\_ pre-authorization?

Will \_\_\_\_\_ without being pre-approved affect \_\_\_\_\_ insurance?

\_\_\_\_\_ plan \_\_\_\_\_ covered if \_\_\_\_\_ skip the \_\_\_\_\_?

What if \_\_\_\_\_ is actually \_\_\_\_\_ by my \_\_\_\_\_ my \_\_\_\_\_?

\_\_\_\_\_ my \_\_\_\_\_ cover \_\_\_\_\_ I \_\_\_\_\_ pre-authorization?

Will the service \_\_\_\_\_ paid \_\_\_\_\_ if \_\_\_\_\_ is covered \_\_\_\_\_ pre-approval?

Is \_\_\_\_\_ treatment covered \_\_\_\_\_?

Will \_\_\_\_\_ be covered \_\_\_\_\_ not get pre-authorization?

Should \_\_\_\_\_ be \_\_\_\_\_ by my \_\_\_\_\_ if \_\_\_\_\_ is \_\_\_\_\_ pre-approved?

Is \_\_\_\_\_ if \_\_\_\_\_ treatment without \_\_\_\_\_?

Does my \_\_\_\_\_ for \_\_\_\_\_ without \_\_\_\_\_?

If \_\_\_\_\_ a procedure without approval \_\_\_\_\_ it's \_\_\_\_\_ my \_\_\_\_\_ I getting?

If I \_\_\_\_\_ a procedure \_\_\_\_\_ within \_\_\_\_\_ coverage, what \_\_\_\_\_ I doing?

Is my \_\_\_\_\_ if \_\_\_\_\_ get \_\_\_\_\_ prior approval?

If \_\_\_\_\_ first, \_\_\_\_\_ be covered for treatments?

What \_\_\_\_\_ if unauthorized \_\_\_\_\_ my plan?

\_\_\_\_\_ my \_\_\_\_\_ services that don't \_\_\_\_\_?

If I \_\_\_\_\_ treatment without \_\_\_\_\_ it turns \_\_\_\_\_ under my \_\_\_\_\_.

\_\_\_\_\_ my \_\_\_\_\_ cover \_\_\_\_\_ a treatment if I \_\_\_\_\_ get \_\_\_\_\_ authorization?

Will \_\_\_\_\_ covered \_\_\_\_\_ my insurance \_\_\_\_\_ I \_\_\_\_\_ get pre-approved?

\_\_\_\_\_ but \_\_\_\_\_ under insurance, what will happen to me?

I receive \_\_\_\_\_ without \_\_\_\_\_ to discover \_\_\_\_\_ was covered \_\_\_\_\_.

\_\_\_\_\_ I \_\_\_\_\_ covered \_\_\_\_\_ treatment \_\_\_\_\_ I don't get \_\_\_\_\_ first?

\_\_\_\_\_ my insurance cover \_\_\_\_\_ treatment if I \_\_\_\_\_ not have \_\_\_\_\_?

\_\_\_\_\_ pre-authorization \_\_\_\_\_ eligible for \_\_\_\_\_?

Will \_\_\_\_\_ be \_\_\_\_\_ I don't \_\_\_\_\_?

Will \_\_\_\_\_ be covered if performed before going \_\_\_\_\_?

\_\_\_\_\_ a medical \_\_\_\_\_ without pre-approval \_\_\_\_\_ whether or \_\_\_\_\_ insurance \_\_\_\_\_ it?

Will the service \_\_\_\_\_ paid \_\_\_\_\_ my \_\_\_\_\_ if \_\_\_\_\_ lacks \_\_\_\_\_?

\_\_\_\_\_ happens if unauthorized treatments \_\_\_\_\_ my \_\_\_\_\_?

\_\_\_\_\_ still \_\_\_\_\_ treatment \_\_\_\_\_ there's no pre-authorization?

\_\_\_\_\_ no pre-authorization, can I \_\_\_\_\_ treatment?

\_\_\_\_\_ would like to \_\_\_\_\_ if \_\_\_\_\_ get treated \_\_\_\_\_ permission \_\_\_\_\_ plan \_\_\_\_\_ covers \_\_\_\_\_.

When treatment isn't \_\_\_\_\_ yet \_\_\_\_\_ covered \_\_\_\_\_ what happens?

\_\_\_\_\_ to have treatment covered if there \_\_\_\_\_?

Will \_\_\_\_\_ a medical \_\_\_\_\_ without \_\_\_\_\_ pre-approved \_\_\_\_\_ affect the \_\_\_\_\_ of \_\_\_\_\_?

If \_\_\_\_\_ treatment without approval \_\_\_\_\_ it's \_\_\_\_\_?

What \_\_\_\_\_ know about its coverage \_\_\_\_\_ when \_\_\_\_\_ receive \_\_\_\_\_ that does not require \_\_\_\_\_?

If \_\_\_\_\_ service \_\_\_\_\_ rendered \_\_\_\_\_ proper authorization, will I \_\_\_\_\_ eligible for \_\_\_\_\_ my \_\_\_\_\_?

If my \_\_\_\_\_ is actually \_\_\_\_\_ by \_\_\_\_\_ without permission?

If \_\_\_\_\_ am \_\_\_\_\_ without permission \_\_\_\_\_ plan \_\_\_\_\_ covers \_\_\_\_\_ I do?

\_\_\_\_\_ I \_\_\_\_\_ treatment and \_\_\_\_\_ out \_\_\_\_\_ covered \_\_\_\_\_ my \_\_\_\_\_ what will happen?

If \_\_\_\_\_ in \_\_\_\_\_ plan, what are \_\_\_\_\_ consequences \_\_\_\_\_ treatment?

\_\_\_\_\_ skip pre-authorization will \_\_\_\_\_ plan still cover \_\_\_\_\_?

If I get \_\_\_\_\_ approval \_\_\_\_\_ it's \_\_\_\_\_ my plan, what \_\_\_\_\_?

What will happen \_\_\_\_\_ a \_\_\_\_\_ that was \_\_\_\_\_ before \_\_\_\_\_ included \_\_\_\_\_ my plan's benefits?

What \_\_\_\_\_ if treatment \_\_\_\_\_ authorized \_\_\_\_\_ is \_\_\_\_\_ by insurance?

If \_\_\_\_\_ covers \_\_\_\_\_ without pre-authorization, \_\_\_\_\_ will \_\_\_\_\_ do?

\_\_\_\_\_ I \_\_\_\_\_ pre-authorization, \_\_\_\_\_ I be covered \_\_\_\_\_ treatment?

\_\_\_\_\_ possible \_\_\_\_\_ me to \_\_\_\_\_ eligible \_\_\_\_\_ coverage if \_\_\_\_\_ lacks pre-approval?

If \_\_\_\_\_ undergo a \_\_\_\_\_ without approval \_\_\_\_\_ is covered by \_\_\_\_\_ plan, \_\_\_\_\_ I \_\_\_\_\_ into?

\_\_\_\_\_ my insurance \_\_\_\_\_ of a treatment \_\_\_\_\_ I don't \_\_\_\_\_ first?

\_\_\_\_\_ I undergo \_\_\_\_\_ without my \_\_\_\_\_ within my plan's coverage, \_\_\_\_\_ am \_\_\_\_\_?

Would the \_\_\_\_\_ services \_\_\_\_\_ pre-approved?

Will \_\_\_\_\_ be \_\_\_\_\_ treatment if I \_\_\_\_\_ get \_\_\_\_\_ before \_\_\_\_\_?

\_\_\_\_\_ insurance cover \_\_\_\_\_ cost \_\_\_\_\_ treatment if \_\_\_\_\_ do \_\_\_\_\_ get authorization?

What happens \_\_\_\_\_ I'm \_\_\_\_\_ but the \_\_\_\_\_ within \_\_\_\_\_ terms?

\_\_\_\_\_ even if I don't have authorization?

If \_\_\_\_\_ treated before \_\_\_\_\_ authorization but \_\_\_\_\_ listed \_\_\_\_\_ will happen?

If I \_\_\_\_\_ pre-authorization, \_\_\_\_\_ plan will \_\_\_\_\_ cover \_\_\_\_\_.

If \_\_\_\_\_ get \_\_\_\_\_ pre-authorization, is it a \_\_\_\_\_ my \_\_\_\_\_?

\_\_\_\_\_ possible \_\_\_\_\_ me to \_\_\_\_\_ treatment \_\_\_\_\_ my consent and still \_\_\_\_\_ it \_\_\_\_\_ my plan?

Does my \_\_\_\_\_ coverage for \_\_\_\_\_?

If \_\_\_\_\_ is \_\_\_\_\_ pre-authorization \_\_\_\_\_ get treatment \_\_\_\_\_ it covered?

\_\_\_\_\_ have a service \_\_\_\_\_ is \_\_\_\_\_ approved before but is \_\_\_\_\_ benefits, what happens \_\_\_\_\_?

I'm \_\_\_\_\_ I'll \_\_\_\_\_ covered \_\_\_\_\_ treatment \_\_\_\_\_ don't get pre-authorization \_\_\_\_\_.

Does \_\_\_\_\_ cover \_\_\_\_\_ of treatment \_\_\_\_\_ I \_\_\_\_\_ have prior \_\_\_\_\_?

I \_\_\_\_\_ to know \_\_\_\_\_ covered \_\_\_\_\_ treatment if I \_\_\_\_\_ pre-authorization \_\_\_\_\_.

\_\_\_\_\_ is \_\_\_\_\_ as a benefit \_\_\_\_\_ my \_\_\_\_\_ but \_\_\_\_\_ happens if \_\_\_\_\_ am \_\_\_\_\_ before \_\_\_\_\_?

\_\_\_\_\_ I have \_\_\_\_\_ approval \_\_\_\_\_ within \_\_\_\_\_ coverage, what am I getting?

\_\_\_\_\_ my insurance cover \_\_\_\_\_ if \_\_\_\_\_ get prior approval?

\_\_\_\_\_ paid by my policy \_\_\_\_\_ lacks pre-authorization?

\_\_\_\_\_ to \_\_\_\_\_ my treatment is not \_\_\_\_\_ falls under \_\_\_\_\_?

Is my plan able \_\_\_\_\_?

If \_\_\_\_\_ and \_\_\_\_\_ insurance, \_\_\_\_\_ will happen to me?

\_\_\_\_\_ I'm treated before receiving authorization, \_\_\_\_\_ happens \_\_\_\_\_ as a \_\_\_\_\_ my \_\_\_\_\_?

\_\_\_\_\_ treatment \_\_\_\_\_ authorized by the \_\_\_\_\_ can I expect \_\_\_\_\_?

\_\_\_\_\_ with \_\_\_\_\_ pre-authorization still qualify \_\_\_\_\_?

\_\_\_\_\_ wondering if \_\_\_\_\_ get \_\_\_\_\_ without permission and have \_\_\_\_\_ plan \_\_\_\_\_ for \_\_\_\_\_.

Will I \_\_\_\_\_ be \_\_\_\_\_ benefits \_\_\_\_\_ a \_\_\_\_\_ is rendered before \_\_\_\_\_ get proper authorization?

\_\_\_\_\_ my \_\_\_\_\_ pay for help \_\_\_\_\_?

\_\_\_\_\_ a medical \_\_\_\_\_ covered \_\_\_\_\_ insurance if it \_\_\_\_\_ pre-approved?

Should \_\_\_\_\_ plan cover \_\_\_\_\_ I \_\_\_\_\_?

\_\_\_\_\_ I skip \_\_\_\_\_ will \_\_\_\_\_ plan still \_\_\_\_\_?

Is my \_\_\_\_\_ to \_\_\_\_\_ received \_\_\_\_\_ pre-authorization?

Is \_\_\_\_\_ possible \_\_\_\_\_ I can get help without my permission \_\_\_\_\_ for \_\_\_\_\_?

\_\_\_\_\_ an unsanctioned \_\_\_\_\_ falls under \_\_\_\_\_?

\_\_\_\_\_ if it's \_\_\_\_\_ as \_\_\_\_\_ benefit \_\_\_\_\_ plan \_\_\_\_\_ I'm \_\_\_\_\_ before receiving authorization.

\_\_\_\_\_ I \_\_\_\_\_ without permission and \_\_\_\_\_ is actually covered, \_\_\_\_\_?

\_\_\_\_\_ treatment \_\_\_\_\_ there is no \_\_\_\_\_?

If \_\_\_\_\_ don't jump through \_\_\_\_\_ get \_\_\_\_\_ only \_\_\_\_\_ on that \_\_\_\_\_ covered, can you believe

\_\_\_\_\_ I \_\_\_\_\_ I don't \_\_\_\_\_ to get \_\_\_\_\_ approval for \_\_\_\_\_?

\_\_\_\_\_ I still have my plan \_\_\_\_\_ for \_\_\_\_\_ permission?

Is it possible \_\_\_\_\_ my plan to \_\_\_\_\_ help \_\_\_\_\_ authorize?

\_\_\_\_\_ I \_\_\_\_\_ procedure without \_\_\_\_\_ but \_\_\_\_\_ my \_\_\_\_\_ am I going \_\_\_\_\_ do?

\_\_\_\_\_ if \_\_\_\_\_ that turns out to be \_\_\_\_\_ plan?

I want \_\_\_\_\_ know if I \_\_\_\_\_ if \_\_\_\_\_ have not gotten \_\_\_\_\_.

\_\_\_\_\_ it possible to get \_\_\_\_\_ without my \_\_\_\_\_ still \_\_\_\_\_ for it?

If I \_\_\_\_\_ plan \_\_\_\_\_ cover treatment?

\_\_\_\_\_ I get treated \_\_\_\_\_ what \_\_\_\_\_ my plan \_\_\_\_\_ covers \_\_\_\_\_?

I want to know \_\_\_\_\_ be \_\_\_\_\_ by \_\_\_\_\_ if I do \_\_\_\_\_.

\_\_\_\_\_ I don't get \_\_\_\_\_ treatment \_\_\_\_\_ covered?

\_\_\_\_\_ treated \_\_\_\_\_ permission and my \_\_\_\_\_ covers it, what \_\_\_\_\_?

Does \_\_\_\_\_ health insurance \_\_\_\_\_ I do not \_\_\_\_\_ approval \_\_\_\_\_?

Is my plan able \_\_\_\_\_ cover \_\_\_\_\_ not \_\_\_\_\_?

\_\_\_\_\_ my plan \_\_\_\_\_ for \_\_\_\_\_ treatment?

Will \_\_\_\_\_ decide \_\_\_\_\_ cover it anyways if I roll \_\_\_\_\_ dice \_\_\_\_\_?

\_\_\_\_\_ happens \_\_\_\_\_ I \_\_\_\_\_ it \_\_\_\_\_ out \_\_\_\_\_ be \_\_\_\_\_ service under my plan?

What \_\_\_\_\_ I \_\_\_\_\_ treatment without pre-authorization \_\_\_\_\_ turns \_\_\_\_\_ be \_\_\_\_\_ under my \_\_\_\_\_?

\_\_\_\_\_ I receive treatment without \_\_\_\_\_ it \_\_\_\_\_ be covered \_\_\_\_\_.

\_\_\_\_\_ I don't \_\_\_\_\_ will \_\_\_\_\_ be covered \_\_\_\_\_ treatment?

\_\_\_\_\_ am I \_\_\_\_\_ to \_\_\_\_\_ undergo a procedure \_\_\_\_\_ but discover \_\_\_\_\_ within \_\_\_\_\_ plan?

\_\_\_\_\_ to \_\_\_\_\_ if treatment \_\_\_\_\_ but falls under \_\_\_\_\_?

\_\_\_\_\_ get treatment that \_\_\_\_\_ require \_\_\_\_\_ I know about \_\_\_\_\_ covered \_\_\_\_\_ under my \_\_\_\_\_?

Does my \_\_\_\_\_ cover the cost of \_\_\_\_\_ have \_\_\_\_\_ authorization?

\_\_\_\_\_ an unsanctioned \_\_\_\_\_ falls \_\_\_\_\_ should happen?

What if I \_\_\_\_\_ turns \_\_\_\_\_ plan actually covers it?

\_\_\_\_\_ am \_\_\_\_\_ if \_\_\_\_\_ by treatment \_\_\_\_\_ I don't \_\_\_\_\_ pre-authorization first.

Is \_\_\_\_\_ coverage still there if I \_\_\_\_\_ without \_\_\_\_\_?

What will \_\_\_\_\_ to me \_\_\_\_\_ the \_\_\_\_\_ is not \_\_\_\_\_ falls \_\_\_\_\_?

\_\_\_\_\_ my plan \_\_\_\_\_ treatment \_\_\_\_\_ skip pre-authorization?

Does my plan \_\_\_\_\_ for \_\_\_\_\_ are \_\_\_\_\_ pre-authorization?

If \_\_\_\_\_ get \_\_\_\_\_ without \_\_\_\_\_ it turns \_\_\_\_\_ to \_\_\_\_\_ covered \_\_\_\_\_ my \_\_\_\_\_.

if \_\_\_\_\_ eligible \_\_\_\_\_ before pre-authorization, will \_\_\_\_\_ still \_\_\_\_\_ covered?

What \_\_\_\_\_ the treatment \_\_\_\_\_ covered but \_\_\_\_\_ approval?

Will \_\_\_\_\_ service be \_\_\_\_\_ by my \_\_\_\_\_ if it is \_\_\_\_\_?

\_\_\_\_\_ treatment be \_\_\_\_\_ don't get \_\_\_\_\_?

\_\_\_\_\_ getting a medical \_\_\_\_\_ pre-approved affect \_\_\_\_\_ insurance \_\_\_\_\_?

\_\_\_\_\_ treatment lacks pre-approval but \_\_\_\_\_ should I \_\_\_\_\_ eligible for \_\_\_\_\_?

Will my \_\_\_\_\_ cover \_\_\_\_\_ I skip \_\_\_\_\_?

\_\_\_\_\_ I have \_\_\_\_\_ without \_\_\_\_\_ but discover it \_\_\_\_\_ my \_\_\_\_\_ what am I \_\_\_\_\_?

If a service not approved \_\_\_\_\_ included \_\_\_\_\_ my \_\_\_\_\_ what \_\_\_\_\_ coverage?

\_\_\_\_\_ I \_\_\_\_\_ not \_\_\_\_\_ first, will \_\_\_\_\_ be \_\_\_\_\_ my treatments?

\_\_\_\_\_ would like \_\_\_\_\_ know if \_\_\_\_\_ covered \_\_\_\_\_ treatment \_\_\_\_\_ have not \_\_\_\_\_ pre-authorization.

Will the \_\_\_\_\_ be covered under \_\_\_\_\_ if \_\_\_\_\_ is \_\_\_\_\_ ?

What happens if treatment \_\_\_\_\_ yet \_\_\_\_\_ is \_\_\_\_\_ by \_\_\_\_\_ ?

If it's \_\_\_\_\_ as a benefit on my \_\_\_\_\_ before \_\_\_\_\_ what \_\_\_\_\_ ?

Is \_\_\_\_\_ covered \_\_\_\_\_ plan if I \_\_\_\_\_ have \_\_\_\_\_ ?

Is my \_\_\_\_\_ I \_\_\_\_\_ treatment without prior \_\_\_\_\_ ?

Does \_\_\_\_\_ cover the \_\_\_\_\_ a treatment even \_\_\_\_\_ don't \_\_\_\_\_ authorization?

What is done \_\_\_\_\_ unsanctioned procedure \_\_\_\_\_ ?

\_\_\_\_\_ unsanctioned procedure is \_\_\_\_\_ ?

\_\_\_\_\_ my plan \_\_\_\_\_ actually covered, what \_\_\_\_\_ without permission?

If \_\_\_\_\_ treatment that is covered on my \_\_\_\_\_ ?

\_\_\_\_\_ undergo \_\_\_\_\_ without \_\_\_\_\_ knowledge but my plan covers \_\_\_\_\_ what \_\_\_\_\_ I \_\_\_\_\_ ?

What happens to \_\_\_\_\_ isn't authorized \_\_\_\_\_ is \_\_\_\_\_ ?

If I don't get \_\_\_\_\_ still \_\_\_\_\_ covered \_\_\_\_\_ the \_\_\_\_\_ ?

\_\_\_\_\_ do you \_\_\_\_\_ an unsanctioned \_\_\_\_\_ covered?

What \_\_\_\_\_ get treatment \_\_\_\_\_ out to be \_\_\_\_\_ under \_\_\_\_\_ plan?

If it \_\_\_\_\_ listed on my plan as \_\_\_\_\_ benefit, \_\_\_\_\_ if I \_\_\_\_\_ authorization?

Will \_\_\_\_\_ cover services \_\_\_\_\_ ?

\_\_\_\_\_ it possible to receive treatment \_\_\_\_\_ prior \_\_\_\_\_ under my plan?

\_\_\_\_\_ I \_\_\_\_\_ it covered if I \_\_\_\_\_ pre-authorization?

Will receiving a \_\_\_\_\_ procedure without pre-approval \_\_\_\_\_ ?

\_\_\_\_\_ the cost \_\_\_\_\_ a treatment even \_\_\_\_\_ don't get \_\_\_\_\_ approval?

What happens \_\_\_\_\_ treatment \_\_\_\_\_ out to be \_\_\_\_\_ my plan?

\_\_\_\_\_ service \_\_\_\_\_ paid \_\_\_\_\_ my policy if \_\_\_\_\_ pre-approved?

\_\_\_\_\_ medical procedure \_\_\_\_\_ being pre-approved \_\_\_\_\_ the coverage \_\_\_\_\_ my \_\_\_\_\_ ?

\_\_\_\_\_ I get \_\_\_\_\_ without permission and my \_\_\_\_\_ ?

\_\_\_\_\_ a \_\_\_\_\_ procedure covered \_\_\_\_\_ my \_\_\_\_\_ if \_\_\_\_\_ it pre-approved?

If I \_\_\_\_\_ pre-authorization then will \_\_\_\_\_ be \_\_\_\_\_ my \_\_\_\_\_ ?

If \_\_\_\_\_ first, will I be covered \_\_\_\_\_ the \_\_\_\_\_ ?

\_\_\_\_\_ my plan have coverage \_\_\_\_\_ ?

What if \_\_\_\_\_ but \_\_\_\_\_ covered?

What \_\_\_\_\_ if \_\_\_\_\_ not pre-approved, \_\_\_\_\_ covered?

I would \_\_\_\_\_ know \_\_\_\_\_ be \_\_\_\_\_ treatment if I \_\_\_\_\_ get pre-authorization.

\_\_\_\_\_ treatment without prior approval does \_\_\_\_\_ insurance cover \_\_\_\_\_ ?

Is \_\_\_\_\_ coverage for services \_\_\_\_\_ ?

\_\_\_\_\_ if \_\_\_\_\_ authorized but is covered \_\_\_\_\_ insurance?

If \_\_\_\_\_ treatment is covered \_\_\_\_\_ my \_\_\_\_\_ what \_\_\_\_\_ ?

If \_\_\_\_\_ prior authorization, \_\_\_\_\_ my \_\_\_\_\_ cover the \_\_\_\_\_ a treatment?

Does my \_\_\_\_\_ for \_\_\_\_\_ without \_\_\_\_\_ ?

\_\_\_\_\_ treatment \_\_\_\_\_ approval \_\_\_\_\_ it's covered.

What \_\_\_\_\_ if \_\_\_\_\_ it's covered?

When \_\_\_\_\_ receive treatment that doesn't require \_\_\_\_\_ approval, \_\_\_\_\_ do \_\_\_\_\_ know \_\_\_\_\_ under my \_\_\_\_\_ ?

\_\_\_\_\_ cover \_\_\_\_\_ if I \_\_\_\_\_ the dice and get treated \_\_\_\_\_ ?

If it's covered, \_\_\_\_\_ I \_\_\_\_\_ treatment \_\_\_\_\_ .

Do \_\_\_\_\_ under \_\_\_\_\_ plan \_\_\_\_\_ a \_\_\_\_\_ service is \_\_\_\_\_ I get proper authorization?

\_\_\_\_\_ happens when \_\_\_\_\_ unauthorized \_\_\_\_\_ is covered \_\_\_\_\_ plan?

\_\_\_\_\_ treatment \_\_\_\_\_ included in my plan \_\_\_\_\_ I still \_\_\_\_\_ covered?

What happens to \_\_\_\_\_ coverage if \_\_\_\_\_ approve \_\_\_\_\_ included \_\_\_\_\_ my benefits?

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

If \_\_\_\_\_ do \_\_\_\_\_ pre-authorization \_\_\_\_\_ will I \_\_\_\_\_ covered \_\_\_\_\_ treatment?

\_\_\_\_\_ health insurance \_\_\_\_\_ still \_\_\_\_\_ if \_\_\_\_\_ receive \_\_\_\_\_ without \_\_\_\_\_ approval?

What happen \_\_\_\_ an \_\_\_\_ is \_\_\_\_?

I \_\_\_\_ if \_\_\_\_ will be covered if I \_\_\_\_ first.

\_\_\_\_ to \_\_\_\_ I'll \_\_\_\_ treatment if I don't get pre-authorization first.

\_\_\_\_ pre-authorization, \_\_\_\_ my \_\_\_\_ still help?

What \_\_\_\_ I know \_\_\_\_ covered by \_\_\_\_ when I get treatment that \_\_\_\_ require \_\_\_\_?

\_\_\_\_ listed \_\_\_\_ a benefit \_\_\_\_ what happens \_\_\_\_ I am treated before \_\_\_\_ authorization?

What happens \_\_\_\_ isn't approved \_\_\_\_ and \_\_\_\_ by \_\_\_\_?

Can \_\_\_\_ get treatment \_\_\_\_ plan \_\_\_\_ don't have prior \_\_\_\_?

If \_\_\_\_ don't \_\_\_\_ pre-authorization \_\_\_\_ be covered \_\_\_\_ treatment?

What \_\_\_\_ as a benefit on \_\_\_\_ plan, \_\_\_\_ I'm treated \_\_\_\_ getting \_\_\_\_?

\_\_\_\_ eligible service still \_\_\_\_ covered \_\_\_\_ performed before pre-authorization \_\_\_\_?

If I \_\_\_\_ get \_\_\_\_ first, \_\_\_\_ covered?

\_\_\_\_ isn't a pre-authorization, \_\_\_\_ I still \_\_\_\_ it \_\_\_\_?

If \_\_\_\_ isn't \_\_\_\_ but \_\_\_\_ insurance, \_\_\_\_ happens to me?

\_\_\_\_ included in my \_\_\_\_ but \_\_\_\_ pre-authorization, will I be covered?

Will \_\_\_\_ still \_\_\_\_ by \_\_\_\_ policy if \_\_\_\_ service is not \_\_\_\_?

Is \_\_\_\_ plan \_\_\_\_ to \_\_\_\_ I don't pre-authorization?

Will \_\_\_\_ if \_\_\_\_ don't get pre-authorization?

When \_\_\_\_ receive treatment \_\_\_\_ doesn't \_\_\_\_ approval, what do \_\_\_\_ my \_\_\_\_?

\_\_\_\_ a procedure \_\_\_\_ approval but \_\_\_\_ within my plan's \_\_\_\_ I \_\_\_\_ into?

What \_\_\_\_ me if treatment isn't approved \_\_\_\_ under \_\_\_\_?

Is it possible \_\_\_\_ get help \_\_\_\_ still \_\_\_\_ plan \_\_\_\_?

What \_\_\_\_ if \_\_\_\_ but falls under insurance?

\_\_\_\_ cover \_\_\_\_ that are received without \_\_\_\_?

\_\_\_\_ I don't \_\_\_\_ then \_\_\_\_ be covered for treatment?

What \_\_\_\_ that is covered \_\_\_\_ plan?

\_\_\_\_ my treatment is \_\_\_\_ on \_\_\_\_ plan, \_\_\_\_ do \_\_\_\_?

\_\_\_\_ I undergo a procedure that \_\_\_\_ I in for?

Should \_\_\_\_ insurance cover me if \_\_\_\_ have \_\_\_\_ approval?

\_\_\_\_ happens to \_\_\_\_ treatment that is covered \_\_\_\_.

\_\_\_\_ listed \_\_\_\_ a \_\_\_\_ on \_\_\_\_ plan, \_\_\_\_ would \_\_\_\_ if I'm \_\_\_\_ receiving authorization?

\_\_\_\_ plan cover \_\_\_\_ without pre-authorization?

\_\_\_\_ I \_\_\_\_ get approval \_\_\_\_ covered?

What \_\_\_\_ happen \_\_\_\_ me if my \_\_\_\_ isn't \_\_\_\_ under \_\_\_\_?

Will \_\_\_\_ be covered \_\_\_\_ my \_\_\_\_ if \_\_\_\_ is not \_\_\_\_?

\_\_\_\_ my \_\_\_\_ my \_\_\_\_ if I \_\_\_\_ get \_\_\_\_ authorization?

\_\_\_\_ my \_\_\_\_ services without prior \_\_\_\_?

\_\_\_\_ my insurance \_\_\_\_ the \_\_\_\_ of a treatment \_\_\_\_ don't \_\_\_\_ authorization?

\_\_\_\_ there \_\_\_\_ no pre-authorization, can \_\_\_\_ it \_\_\_\_?

If \_\_\_\_ pre-authorization first, will \_\_\_\_ be covered \_\_\_\_ my \_\_\_\_?

Does my \_\_\_\_ cover the \_\_\_\_ even \_\_\_\_ I \_\_\_\_ authorization?

\_\_\_\_ the procedure covered \_\_\_\_ my insurance \_\_\_\_ pre-approved?

If \_\_\_\_ treatment without \_\_\_\_ approval, \_\_\_\_ my health \_\_\_\_ cover \_\_\_\_?

\_\_\_\_ know if I will \_\_\_\_ covered \_\_\_\_ treatment if I \_\_\_\_ pre-authorization.

If \_\_\_\_ pre-authorization first, would I be covered \_\_\_\_?

\_\_\_\_ my \_\_\_\_ the \_\_\_\_ of a \_\_\_\_ if I \_\_\_\_ have \_\_\_\_?

\_\_\_\_ treatment \_\_\_\_ authorized but \_\_\_\_ under insurance?

\_\_\_\_ my \_\_\_\_ cover the \_\_\_\_ I \_\_\_\_ pre-authorization?

If \_\_\_\_ a benefit on \_\_\_\_ plan but \_\_\_\_ before \_\_\_\_ what happens?

\_\_\_\_ will \_\_\_\_ if \_\_\_\_ procedure falls under \_\_\_\_.

Does my plan \_\_\_\_\_ that \_\_\_\_\_?

\_\_\_\_\_ medical procedure without \_\_\_\_\_ pre-approved by my \_\_\_\_\_ coverage?

\_\_\_\_\_ to \_\_\_\_\_ if my treatment is \_\_\_\_\_ if \_\_\_\_\_ get \_\_\_\_\_.

What happens \_\_\_\_\_ am treated before \_\_\_\_\_ is within the \_\_\_\_\_?

If \_\_\_\_\_ is \_\_\_\_\_ in \_\_\_\_\_ not pre-authorization, will \_\_\_\_\_ be covered?

\_\_\_\_\_ procedure if not \_\_\_\_\_ affect my \_\_\_\_\_ coverage?

\_\_\_\_\_ my plan \_\_\_\_\_ that \_\_\_\_\_ pre-authorization?

Will the \_\_\_\_\_ covered \_\_\_\_\_ it's performed before \_\_\_\_\_?

Does my insurance \_\_\_\_\_ the cost \_\_\_\_\_ a \_\_\_\_\_ do \_\_\_\_\_ prior \_\_\_\_\_?

Does my \_\_\_\_\_ pay \_\_\_\_\_ that \_\_\_\_\_ pre-authorization?

What \_\_\_\_\_ get treatment without pre-authorization \_\_\_\_\_ it turns \_\_\_\_\_ be \_\_\_\_\_ my \_\_\_\_\_?

When \_\_\_\_\_ get \_\_\_\_\_ that is \_\_\_\_\_ pre-authorization, \_\_\_\_\_?

What happens \_\_\_\_\_ treatment \_\_\_\_\_ my plan \_\_\_\_\_?

\_\_\_\_\_ I get treatment \_\_\_\_\_ it's \_\_\_\_\_?

If \_\_\_\_\_ treatment wasn't \_\_\_\_\_ by my \_\_\_\_\_ can I \_\_\_\_\_?

\_\_\_\_\_ plan provide coverage for \_\_\_\_\_?

\_\_\_\_\_ treatment that is covered by \_\_\_\_\_?

Will \_\_\_\_\_ pay if \_\_\_\_\_ don't \_\_\_\_\_?

\_\_\_\_\_ I \_\_\_\_\_ treatment without approval but \_\_\_\_\_ covered, \_\_\_\_\_?

\_\_\_\_\_ a service \_\_\_\_\_ be paid \_\_\_\_\_ my \_\_\_\_\_ it \_\_\_\_\_ covered \_\_\_\_\_ not \_\_\_\_\_?

\_\_\_\_\_ my \_\_\_\_\_ cover the cost of a \_\_\_\_\_ if \_\_\_\_\_ given \_\_\_\_\_?

\_\_\_\_\_ do \_\_\_\_\_ know about \_\_\_\_\_ covered \_\_\_\_\_ treatment without prior approval?

\_\_\_\_\_ if my \_\_\_\_\_ covers \_\_\_\_\_ treatment.

Should I \_\_\_\_\_ be eligible \_\_\_\_\_ my plan \_\_\_\_\_ a \_\_\_\_\_ service \_\_\_\_\_ rendered \_\_\_\_\_ authorization?

Does my \_\_\_\_\_ cover \_\_\_\_\_ cost of \_\_\_\_\_ I \_\_\_\_\_ authorization?

\_\_\_\_\_ I \_\_\_\_\_ get \_\_\_\_\_ for my treatment, \_\_\_\_\_ covered?

\_\_\_\_\_ insurance cover the cost of a \_\_\_\_\_ I don't \_\_\_\_\_?

\_\_\_\_\_ it possible to have \_\_\_\_\_ is provided without \_\_\_\_\_?

What happens \_\_\_\_\_ if \_\_\_\_\_ treatment isn't \_\_\_\_\_ is \_\_\_\_\_?

If I \_\_\_\_\_ without pre-authorization, \_\_\_\_\_ out \_\_\_\_\_ be \_\_\_\_\_ under \_\_\_\_\_ plan.

What do \_\_\_\_\_ about my \_\_\_\_\_ after \_\_\_\_\_ receive treatment that \_\_\_\_\_ prior \_\_\_\_\_?

\_\_\_\_\_ treated before authorization \_\_\_\_\_ the service \_\_\_\_\_ within the \_\_\_\_\_ what \_\_\_\_\_?

If I \_\_\_\_\_ before but is included in \_\_\_\_\_ plan's \_\_\_\_\_ happens \_\_\_\_\_ my coverage?

\_\_\_\_\_ if my \_\_\_\_\_ turns \_\_\_\_\_ to be a covered \_\_\_\_\_?

I \_\_\_\_\_ wondering if \_\_\_\_\_ was an \_\_\_\_\_ got a \_\_\_\_\_ service without \_\_\_\_\_.

\_\_\_\_\_ a medical \_\_\_\_\_ covered \_\_\_\_\_ my \_\_\_\_\_ it \_\_\_\_\_ not pre-approved?

\_\_\_\_\_ I be covered if I \_\_\_\_\_ not \_\_\_\_\_ the \_\_\_\_\_ is \_\_\_\_\_ plan?

\_\_\_\_\_ decide to cover it even if \_\_\_\_\_ roll \_\_\_\_\_ and \_\_\_\_\_ first?

\_\_\_\_\_ my plan \_\_\_\_\_ services that aren't \_\_\_\_\_?

\_\_\_\_\_ still \_\_\_\_\_ under my \_\_\_\_\_ if \_\_\_\_\_ is rendered before authorization \_\_\_\_\_ obtained?

\_\_\_\_\_ want to know \_\_\_\_\_ the \_\_\_\_\_ my \_\_\_\_\_ if I don't get \_\_\_\_\_.

\_\_\_\_\_ cover the treatment \_\_\_\_\_ receive without prior \_\_\_\_\_?

\_\_\_\_\_ I know about \_\_\_\_\_ service under my plan if \_\_\_\_\_ require prior approval?

\_\_\_\_\_ happens after \_\_\_\_\_ procedure falls \_\_\_\_\_.

Will receiving \_\_\_\_\_ medical procedure without \_\_\_\_\_ pre-approved affect \_\_\_\_\_ insurance?

Is my \_\_\_\_\_ able \_\_\_\_\_ cover \_\_\_\_\_?

\_\_\_\_\_ if \_\_\_\_\_ treatment wasn't authorized \_\_\_\_\_ my plan, \_\_\_\_\_ expect \_\_\_\_\_?

\_\_\_\_\_ happens \_\_\_\_\_ listed as a \_\_\_\_\_ on \_\_\_\_\_ plan, \_\_\_\_\_ before receiving authorization?

\_\_\_\_\_ about treatments without prior \_\_\_\_\_ are \_\_\_\_\_ coverage \_\_\_\_\_?

When I'm \_\_\_\_\_ before authorization but the \_\_\_\_\_ within \_\_\_\_\_?



\_\_\_\_ if I \_\_\_\_ get pre-authorization \_\_\_\_ will \_\_\_\_ covered \_\_\_\_ my \_\_\_\_?  
 If \_\_\_\_ does my \_\_\_\_ insurance policy still cover it?  
 Can I get \_\_\_\_ without \_\_\_\_ have \_\_\_\_ plan \_\_\_\_ for \_\_\_\_?  
 Does \_\_\_\_ insurance cover the cost \_\_\_\_ a procedure \_\_\_\_ don't \_\_\_\_?  
 \_\_\_\_ I \_\_\_\_ without approval but \_\_\_\_ covered by \_\_\_\_ plan, \_\_\_\_ am I going \_\_\_\_?  
 What happens to \_\_\_\_ if \_\_\_\_ service \_\_\_\_ was \_\_\_\_ approved in \_\_\_\_ is \_\_\_\_ benefits?  
 \_\_\_\_ my \_\_\_\_ services that do \_\_\_\_ have \_\_\_\_?  
 If \_\_\_\_ get a medical \_\_\_\_ without \_\_\_\_ affect my insurance?  
 What happens \_\_\_\_ get \_\_\_\_ covered \_\_\_\_ without \_\_\_\_ authorization?  
 If \_\_\_\_ covered \_\_\_\_ is \_\_\_\_ before proper authorization, \_\_\_\_ for \_\_\_\_ under \_\_\_\_ plan?  
 What \_\_\_\_ to me \_\_\_\_ treatment \_\_\_\_ but \_\_\_\_ insurance.  
 If I \_\_\_\_ without \_\_\_\_ my plan actually \_\_\_\_ it, what \_\_\_\_ I \_\_\_\_?  
 Does \_\_\_\_ health insurance cover \_\_\_\_ if \_\_\_\_ no \_\_\_\_ for \_\_\_\_ treatment?  
 \_\_\_\_ my insurance cover the \_\_\_\_ of \_\_\_\_ I \_\_\_\_ get \_\_\_\_?  
 I want to \_\_\_\_ I \_\_\_\_ covered by \_\_\_\_ get pre-authorization.  
 Does \_\_\_\_ plan pay \_\_\_\_ services \_\_\_\_?  
 \_\_\_\_ if \_\_\_\_ treated \_\_\_\_ permission and discover that \_\_\_\_ covers \_\_\_\_?  
 \_\_\_\_ to my \_\_\_\_ if a \_\_\_\_ is \_\_\_\_ my plan's \_\_\_\_ but \_\_\_\_ not approved \_\_\_\_?  
 What \_\_\_\_ I \_\_\_\_ treatment without pre-authorization \_\_\_\_ be covered by my \_\_\_\_?  
 Will \_\_\_\_ paid by my policy if it \_\_\_\_ but \_\_\_\_ pre- \_\_\_\_?  
 If \_\_\_\_ have \_\_\_\_ procedure without my \_\_\_\_ it's within \_\_\_\_ coverage, \_\_\_\_ doing?  
 I want \_\_\_\_ treatment \_\_\_\_ be \_\_\_\_ I do \_\_\_\_ receive pre-authorization first.  
 What happens when an unauthorized \_\_\_\_ covered \_\_\_\_.  
 \_\_\_\_ the \_\_\_\_ lacks pre-approval but \_\_\_\_ coverage \_\_\_\_ should I \_\_\_\_ for \_\_\_\_?  
 \_\_\_\_ an unsanctioned \_\_\_\_ is \_\_\_\_ happens?  
 What if I \_\_\_\_ treated \_\_\_\_ and \_\_\_\_ actually covers \_\_\_\_?  
 Will my \_\_\_\_ be covered \_\_\_\_?  
 What \_\_\_\_ my treatment \_\_\_\_ but not pre-approved?  
 Is \_\_\_\_ possible for me \_\_\_\_ remain \_\_\_\_ coverage if \_\_\_\_ pre-approval?  
 \_\_\_\_ receiving \_\_\_\_ without getting \_\_\_\_ affect my insurance?  
 What \_\_\_\_ I in for \_\_\_\_ a procedure \_\_\_\_ approval \_\_\_\_ discover it's \_\_\_\_ my \_\_\_\_?  
 If it's listed as a benefit \_\_\_\_ before \_\_\_\_ authorization, \_\_\_\_ happen?  
 \_\_\_\_ my \_\_\_\_ cover me if I \_\_\_\_ treatment \_\_\_\_ approval?  
 Does my health \_\_\_\_ cover \_\_\_\_ have \_\_\_\_ approval for \_\_\_\_?  
 If \_\_\_\_ get \_\_\_\_ without permission \_\_\_\_ out my plan \_\_\_\_ it, \_\_\_\_ that \_\_\_\_?  
 If I \_\_\_\_ a procedure without my knowledge \_\_\_\_ covered \_\_\_\_ am \_\_\_\_ for?  
 What \_\_\_\_ know \_\_\_\_ coverage under \_\_\_\_ plan when I do not \_\_\_\_ for \_\_\_\_?  
 What \_\_\_\_ my coverage if I \_\_\_\_ a service \_\_\_\_ before \_\_\_\_ is \_\_\_\_ plan's benefits?  
 If \_\_\_\_ treated \_\_\_\_ permission, and \_\_\_\_ actually covers it, \_\_\_\_?  
 \_\_\_\_ I don't get pre-authorization first \_\_\_\_ I be \_\_\_\_?  
 \_\_\_\_ treatment \_\_\_\_ pre-authorization \_\_\_\_ covered \_\_\_\_ plan, what happens?  
 \_\_\_\_ happens to me if \_\_\_\_ is \_\_\_\_ authorized \_\_\_\_ under \_\_\_\_?  
 Is it possible \_\_\_\_ treatment without prior \_\_\_\_ get \_\_\_\_ my plan?  
 Should \_\_\_\_ be eligible for \_\_\_\_ my \_\_\_\_ if a \_\_\_\_ service is \_\_\_\_ before obtaining \_\_\_\_?  
 If I \_\_\_\_ treatment \_\_\_\_ out to be a \_\_\_\_ under my plan, \_\_\_\_?  
 Does \_\_\_\_ insurance cover the cost \_\_\_\_ a \_\_\_\_ I \_\_\_\_ prior \_\_\_\_?  
 \_\_\_\_ I \_\_\_\_ eligible for \_\_\_\_ if \_\_\_\_ doesn't have pre-approval?  
 Is it \_\_\_\_ to \_\_\_\_ permission, \_\_\_\_ have my \_\_\_\_ for it?  
 \_\_\_\_ getting a \_\_\_\_ pre-approved \_\_\_\_ my insurance?  
 \_\_\_\_ I get \_\_\_\_ pre-authorization and it \_\_\_\_ to be \_\_\_\_ my plan, what \_\_\_\_ I \_\_\_\_?

\_\_\_\_\_ treated before \_\_\_\_\_ authorization but \_\_\_\_\_ listed on \_\_\_\_\_ what will \_\_\_\_\_?

\_\_\_\_\_ the \_\_\_\_\_ by my \_\_\_\_\_ I don't get \_\_\_\_\_ pre-approved?

\_\_\_\_\_ my plan \_\_\_\_\_ cover treatment \_\_\_\_\_ I \_\_\_\_\_?

Is there a problem \_\_\_\_\_ I \_\_\_\_\_ without \_\_\_\_\_ authorization?

If I'm \_\_\_\_\_ permission \_\_\_\_\_ plan \_\_\_\_\_ covered, \_\_\_\_\_ should I do?

Does my \_\_\_\_\_ without preauthorization?

\_\_\_\_\_ do \_\_\_\_\_ treatment \_\_\_\_\_ authorized but falls under insurance?

If I \_\_\_\_\_ treatment and \_\_\_\_\_ be \_\_\_\_\_ under \_\_\_\_\_ plan, what will happen?

My \_\_\_\_\_ may provide \_\_\_\_\_ for \_\_\_\_\_ are not \_\_\_\_\_.

\_\_\_\_\_ it \_\_\_\_\_ help \_\_\_\_\_ permission and still have the \_\_\_\_\_ pay \_\_\_\_\_?

\_\_\_\_\_ is \_\_\_\_\_ plan's \_\_\_\_\_ but without \_\_\_\_\_ approval, \_\_\_\_\_ am I doing?

\_\_\_\_\_ my plan \_\_\_\_\_ cover \_\_\_\_\_ if \_\_\_\_\_ don't \_\_\_\_\_ pre-authorization?

I \_\_\_\_\_ if I \_\_\_\_\_ covered for treatment \_\_\_\_\_ don't \_\_\_\_\_ pre-authorization \_\_\_\_\_.

\_\_\_\_\_ want to \_\_\_\_\_ if \_\_\_\_\_ will be covered \_\_\_\_\_ if \_\_\_\_\_ pre-authorization first.

What if I am \_\_\_\_\_ permission \_\_\_\_\_ covers \_\_\_\_\_?

\_\_\_\_\_ plan covers \_\_\_\_\_ aren't pre-authorization?

What \_\_\_\_\_ when treatment \_\_\_\_\_ approved yet \_\_\_\_\_ covered \_\_\_\_\_?

\_\_\_\_\_ if \_\_\_\_\_ covered but \_\_\_\_\_ get \_\_\_\_\_ approval?

If a \_\_\_\_\_ that \_\_\_\_\_ approved before \_\_\_\_\_ included in \_\_\_\_\_ benefits, what \_\_\_\_\_ my \_\_\_\_\_?

When I \_\_\_\_\_ and realize it \_\_\_\_\_ covered, \_\_\_\_\_ happens?

What \_\_\_\_\_ I know about \_\_\_\_\_ service \_\_\_\_\_ my plan, when I \_\_\_\_\_ that \_\_\_\_\_ approval?

\_\_\_\_\_ able to cover \_\_\_\_\_ that are not \_\_\_\_\_?

What do \_\_\_\_\_ know \_\_\_\_\_ plan's covered \_\_\_\_\_ treatment \_\_\_\_\_ prior approval?

\_\_\_\_\_ I know about \_\_\_\_\_ covered \_\_\_\_\_ get treatment \_\_\_\_\_ doesn't \_\_\_\_\_ prior approval?

If \_\_\_\_\_ isn't authorized \_\_\_\_\_ insurance, what \_\_\_\_\_ happen \_\_\_\_\_ me?

\_\_\_\_\_ I \_\_\_\_\_ pre-authorization, will my \_\_\_\_\_ my treatment?

What happens if \_\_\_\_\_ service \_\_\_\_\_ the \_\_\_\_\_ treated before \_\_\_\_\_?

Should I still be eligible for \_\_\_\_\_ my \_\_\_\_\_ a covered \_\_\_\_\_ is \_\_\_\_\_ before \_\_\_\_\_?

\_\_\_\_\_ it \_\_\_\_\_ me to \_\_\_\_\_ my knowledge and \_\_\_\_\_ have \_\_\_\_\_ pay for it?

\_\_\_\_\_ there is \_\_\_\_\_ pre-authorization, can \_\_\_\_\_ covered?

What \_\_\_\_\_ to my \_\_\_\_\_ if \_\_\_\_\_ is included \_\_\_\_\_ even though it \_\_\_\_\_ not \_\_\_\_\_ before?

I don't \_\_\_\_\_ happens with \_\_\_\_\_ covered \_\_\_\_\_ my plan.

\_\_\_\_\_ I \_\_\_\_\_ my \_\_\_\_\_ pay \_\_\_\_\_ help \_\_\_\_\_ permission?

Is it still paid \_\_\_\_\_ plan \_\_\_\_\_ without prior consent?

Will \_\_\_\_\_ plan still \_\_\_\_\_ eligible \_\_\_\_\_ if \_\_\_\_\_ is done \_\_\_\_\_?

Will \_\_\_\_\_ be \_\_\_\_\_ with \_\_\_\_\_ plan if \_\_\_\_\_ don't get \_\_\_\_\_?

\_\_\_\_\_ do not \_\_\_\_\_ pre-authorization \_\_\_\_\_ then will \_\_\_\_\_ covered for my \_\_\_\_\_?

If \_\_\_\_\_ what would \_\_\_\_\_ treatment without approval?

What \_\_\_\_\_ I get \_\_\_\_\_ before but is included in \_\_\_\_\_ benefits?

If \_\_\_\_\_ is \_\_\_\_\_ approved before but is \_\_\_\_\_ in \_\_\_\_\_ what happens to \_\_\_\_\_ coverage?

\_\_\_\_\_ my plan \_\_\_\_\_ coverage for \_\_\_\_\_ that \_\_\_\_\_ pre-authorization?

What \_\_\_\_\_ when I \_\_\_\_\_ to be covered under \_\_\_\_\_ plan?

What \_\_\_\_\_ I \_\_\_\_\_ if the \_\_\_\_\_ is \_\_\_\_\_ my \_\_\_\_\_ coverage?

What happens if I \_\_\_\_\_ unauthorized \_\_\_\_\_ plan.

I \_\_\_\_\_ what \_\_\_\_\_ if I \_\_\_\_\_ treated \_\_\_\_\_ permission \_\_\_\_\_ plan actually covers \_\_\_\_\_.

Does my \_\_\_\_\_ cover me \_\_\_\_\_ receive treatment \_\_\_\_\_?

Will \_\_\_\_\_ policy \_\_\_\_\_ without pre-approval?

I \_\_\_\_\_ know if \_\_\_\_\_ will be covered \_\_\_\_\_ treatment \_\_\_\_\_ gotten \_\_\_\_\_ first.

\_\_\_\_\_ my health insurance cover me \_\_\_\_\_ get \_\_\_\_\_ my \_\_\_\_\_?

What \_\_\_\_\_ I \_\_\_\_\_ get \_\_\_\_\_ but \_\_\_\_\_ covered?

If \_\_\_\_ plan covers \_\_\_\_ pre-approved, \_\_\_\_ I do?  
 What \_\_\_\_ it's \_\_\_\_ even \_\_\_\_ don't \_\_\_\_ approval?  
 Will my plan \_\_\_\_ treatments \_\_\_\_ I \_\_\_\_?  
 Will \_\_\_\_ covered \_\_\_\_ my \_\_\_\_ if I \_\_\_\_ pre-authorization first?  
 Is \_\_\_\_ without \_\_\_\_ my plan?  
 If \_\_\_\_ service that wasn't approved before, \_\_\_\_ is \_\_\_\_ my benefits, \_\_\_\_ to my \_\_\_\_?  
 I don't \_\_\_\_ what to do if \_\_\_\_ my \_\_\_\_.  
 Does \_\_\_\_ insurance cover me if I \_\_\_\_?  
 \_\_\_\_ do I know \_\_\_\_ the \_\_\_\_ plan when I \_\_\_\_ that does not require \_\_\_\_?  
 \_\_\_\_ I \_\_\_\_ treatment without \_\_\_\_ turns out to be \_\_\_\_ under my \_\_\_\_ should I \_\_\_\_?  
 If \_\_\_\_ undergo \_\_\_\_ without \_\_\_\_ but discover it's within my plan, \_\_\_\_?  
 \_\_\_\_ happens if \_\_\_\_ service is covered \_\_\_\_?  
 What \_\_\_\_ covered, but \_\_\_\_ get \_\_\_\_ without \_\_\_\_?  
 \_\_\_\_ continue \_\_\_\_ if I skip pre-authorization?  
 If an \_\_\_\_ service \_\_\_\_ performed \_\_\_\_ done will it \_\_\_\_ be \_\_\_\_?  
 \_\_\_\_ the \_\_\_\_ cover \_\_\_\_ that \_\_\_\_ pre-approved?  
 \_\_\_\_ benefits under my plan if a \_\_\_\_ is \_\_\_\_ receiving proper \_\_\_\_?  
 \_\_\_\_ is within my \_\_\_\_ coverage, but \_\_\_\_ what am I \_\_\_\_?  
 If \_\_\_\_ no \_\_\_\_ can I \_\_\_\_ and \_\_\_\_ it paid \_\_\_\_?  
 \_\_\_\_ treatment \_\_\_\_ covered, what then?  
 \_\_\_\_ my \_\_\_\_ go \_\_\_\_ it if I roll the \_\_\_\_ treated first?  
 If I \_\_\_\_ that \_\_\_\_ before but is \_\_\_\_ plan's \_\_\_\_ what happens \_\_\_\_ my coverage?  
 \_\_\_\_ on \_\_\_\_ plan as \_\_\_\_ benefit, \_\_\_\_ happens \_\_\_\_ I am treated before \_\_\_\_?  
 \_\_\_\_ there isn't \_\_\_\_ can \_\_\_\_ treatment and have \_\_\_\_?  
 If there is \_\_\_\_ pre-authorization can I \_\_\_\_ treatment \_\_\_\_?  
 What \_\_\_\_ treatment is covered by \_\_\_\_.  
 \_\_\_\_ I get help \_\_\_\_ knowledge and \_\_\_\_ have \_\_\_\_ for it?  
 \_\_\_\_ happens \_\_\_\_ me if treatment is not \_\_\_\_?  
 \_\_\_\_ for \_\_\_\_ to be paid \_\_\_\_ under \_\_\_\_ without my consent?  
 \_\_\_\_ I do not \_\_\_\_ will \_\_\_\_ be covered?  
 If I \_\_\_\_ a procedure without approval \_\_\_\_ within my \_\_\_\_ what \_\_\_\_?  
 \_\_\_\_ I \_\_\_\_ covered \_\_\_\_ my plan when \_\_\_\_ get \_\_\_\_ without prior approval?  
 \_\_\_\_ I'm \_\_\_\_ before \_\_\_\_ it's \_\_\_\_ on \_\_\_\_ plan, what would happen?  
 If a \_\_\_\_ that \_\_\_\_ is \_\_\_\_ plan's \_\_\_\_ will happen to my coverage?  
 \_\_\_\_ want \_\_\_\_ if \_\_\_\_ be \_\_\_\_ by treatment if \_\_\_\_ do \_\_\_\_ get pre-authorization \_\_\_\_.  
 What if \_\_\_\_ service \_\_\_\_ pre-authorization \_\_\_\_?  
 I \_\_\_\_ to \_\_\_\_ if \_\_\_\_ will be covered \_\_\_\_ treatment \_\_\_\_ don't \_\_\_\_ pre-authorization \_\_\_\_.  
 Does \_\_\_\_ cover \_\_\_\_ cost \_\_\_\_ treatments if I \_\_\_\_ prior \_\_\_\_?  
 What do I \_\_\_\_ about the coverage \_\_\_\_ my \_\_\_\_ without \_\_\_\_ approval?  
 \_\_\_\_ I still \_\_\_\_ for benefits under my \_\_\_\_ if \_\_\_\_ covered service is \_\_\_\_?  
 \_\_\_\_ when \_\_\_\_ service \_\_\_\_ within the terms \_\_\_\_ I'm treated \_\_\_\_?  
 Is my plan covering \_\_\_\_?  
 \_\_\_\_ still receive benefits \_\_\_\_ plan \_\_\_\_ a covered service \_\_\_\_ rendered before \_\_\_\_?  
 \_\_\_\_ my plan did not authorize \_\_\_\_ can \_\_\_\_ expect \_\_\_\_?  
 \_\_\_\_ I \_\_\_\_ for \_\_\_\_ under \_\_\_\_ plan if \_\_\_\_ covered \_\_\_\_ is rendered before I get \_\_\_\_?  
 \_\_\_\_ I \_\_\_\_ a service \_\_\_\_ approved \_\_\_\_ but \_\_\_\_ in my benefits, what \_\_\_\_ happen \_\_\_\_ my \_\_\_\_?  
 \_\_\_\_ though the treatment \_\_\_\_ approved by \_\_\_\_ can \_\_\_\_ coverage?  
 \_\_\_\_ my insurance \_\_\_\_ if \_\_\_\_ don't \_\_\_\_ prior authorization for \_\_\_\_ procedure?  
 \_\_\_\_ my \_\_\_\_ cover \_\_\_\_ of a \_\_\_\_ I don't \_\_\_\_ consent?  
 \_\_\_\_ if I'm treated \_\_\_\_ authorization \_\_\_\_ service is within \_\_\_\_?

What am I \_\_\_\_\_ undergo a procedure \_\_\_\_\_ within \_\_\_\_\_ coverage?  
 \_\_\_\_\_ I \_\_\_\_\_ covered for \_\_\_\_\_ if not \_\_\_\_\_ first?  
 \_\_\_\_\_ my insurance \_\_\_\_\_ the \_\_\_\_\_ of \_\_\_\_\_ don't have authorization?  
 \_\_\_\_\_ treatment without prior \_\_\_\_\_ does \_\_\_\_\_ health insurance policy \_\_\_\_\_ me?  
 \_\_\_\_\_ treatment be covered even \_\_\_\_\_ plan \_\_\_\_\_ authorize \_\_\_\_\_?  
 I \_\_\_\_\_ know if I \_\_\_\_\_ the \_\_\_\_\_ if I do \_\_\_\_\_ pre-authorization first.  
 Does \_\_\_\_\_ cover services that \_\_\_\_\_ received without \_\_\_\_\_?  
 \_\_\_\_\_ do I know about my \_\_\_\_\_ I \_\_\_\_\_ treatment that \_\_\_\_\_ approval?  
 \_\_\_\_\_ I undergo \_\_\_\_\_ not approved \_\_\_\_\_ but \_\_\_\_\_ included in my \_\_\_\_\_ happens to my \_\_\_\_\_?  
 \_\_\_\_\_ treatment \_\_\_\_\_ covered even if \_\_\_\_\_ isn't authorized by \_\_\_\_\_?  
 If I \_\_\_\_\_ pre-authorization for treatment, will \_\_\_\_\_?  
 \_\_\_\_\_ if \_\_\_\_\_ isn't \_\_\_\_\_ but under insurance?  
 Does my \_\_\_\_\_ cover the cost \_\_\_\_\_ even \_\_\_\_\_ I \_\_\_\_\_ get \_\_\_\_\_?  
 What happens \_\_\_\_\_ the service is \_\_\_\_\_ terms \_\_\_\_\_ I \_\_\_\_\_ before \_\_\_\_\_?  
 \_\_\_\_\_ if treatment that's \_\_\_\_\_ my \_\_\_\_\_ isn't \_\_\_\_\_?  
 What should I \_\_\_\_\_ if \_\_\_\_\_ prior \_\_\_\_\_ for \_\_\_\_\_ treatment?  
 \_\_\_\_\_ I get \_\_\_\_\_ procedure \_\_\_\_\_ but \_\_\_\_\_ within my \_\_\_\_\_ coverage, what am \_\_\_\_\_?  
 \_\_\_\_\_ receive \_\_\_\_\_ covered by \_\_\_\_\_ plan, what happens?  
 \_\_\_\_\_ I \_\_\_\_\_ about \_\_\_\_\_ plan's coverage when I \_\_\_\_\_ treatment that doesn't \_\_\_\_\_?  
 If I have a service \_\_\_\_\_ is \_\_\_\_\_ approved before \_\_\_\_\_ included \_\_\_\_\_ happen to my \_\_\_\_\_?  
 If \_\_\_\_\_ receive treatment without \_\_\_\_\_ it \_\_\_\_\_ be \_\_\_\_\_ under my plan.  
 Can you believe \_\_\_\_\_ I \_\_\_\_\_ through your \_\_\_\_\_ get treated, \_\_\_\_\_ to learn \_\_\_\_\_ covered ,  
 Should a \_\_\_\_\_ procedure \_\_\_\_\_ covered \_\_\_\_\_ insurance \_\_\_\_\_ I \_\_\_\_\_ not get \_\_\_\_\_?  
 Should I still \_\_\_\_\_ eligible \_\_\_\_\_ coverage if \_\_\_\_\_ not \_\_\_\_\_?  
 If \_\_\_\_\_ unauthorized \_\_\_\_\_ it be covered?  
 If I haven't gotten \_\_\_\_\_ covered \_\_\_\_\_ treatment?  
 I need to \_\_\_\_\_ if \_\_\_\_\_ be covered if \_\_\_\_\_ don't \_\_\_\_\_.  
 Can I still \_\_\_\_\_ pre-authorization?  
 \_\_\_\_\_ if \_\_\_\_\_ service that wasn't \_\_\_\_\_ but is included \_\_\_\_\_ my benefits?  
 If the treatment \_\_\_\_\_ I get it \_\_\_\_\_?  
 If I get \_\_\_\_\_ plan actually covers \_\_\_\_\_ what \_\_\_\_\_ happen?  
 \_\_\_\_\_ be \_\_\_\_\_ by my policy \_\_\_\_\_ service is not pre-approved?  
 Is my \_\_\_\_\_ covered \_\_\_\_\_ no \_\_\_\_\_?  
 It is \_\_\_\_\_ my plan \_\_\_\_\_ a benefit, but \_\_\_\_\_ I am treated \_\_\_\_\_?  
 \_\_\_\_\_ my plan \_\_\_\_\_ cover \_\_\_\_\_ skip preauthorization?  
 What \_\_\_\_\_ I \_\_\_\_\_ about the covered service \_\_\_\_\_ when I \_\_\_\_\_ require approval?  
 \_\_\_\_\_ if the treatment \_\_\_\_\_ authorized but \_\_\_\_\_ under \_\_\_\_\_?  
 \_\_\_\_\_ my \_\_\_\_\_ cover \_\_\_\_\_ of a \_\_\_\_\_ without \_\_\_\_\_ authorization?  
 \_\_\_\_\_ a medical \_\_\_\_\_ covered by \_\_\_\_\_ if \_\_\_\_\_ is not pre-approved?  
 If \_\_\_\_\_ a \_\_\_\_\_ without approval \_\_\_\_\_ find out \_\_\_\_\_ my plan, what \_\_\_\_\_ in for?  
 What should \_\_\_\_\_ procedure is \_\_\_\_\_?  
 \_\_\_\_\_ I \_\_\_\_\_ not get pre-authorization, \_\_\_\_\_ for treatment?  
 \_\_\_\_\_ I get \_\_\_\_\_ without pre-authorization, is \_\_\_\_\_ a \_\_\_\_\_?  
 What \_\_\_\_\_ if \_\_\_\_\_ get treated \_\_\_\_\_ permission and \_\_\_\_\_ out that \_\_\_\_\_ it?  
 If I don't \_\_\_\_\_ pre-authorization first \_\_\_\_\_ for treatment?  
 Does \_\_\_\_\_ insurance cover \_\_\_\_\_ price \_\_\_\_\_ a treatment \_\_\_\_\_ I don't \_\_\_\_\_?  
 \_\_\_\_\_ do \_\_\_\_\_ know \_\_\_\_\_ its coverage \_\_\_\_\_ plan \_\_\_\_\_ I \_\_\_\_\_ treatment \_\_\_\_\_ prior approval?  
 \_\_\_\_\_ treated without permission and my \_\_\_\_\_ what then?  
 If a \_\_\_\_\_ was not \_\_\_\_\_ is \_\_\_\_\_ in the plan's \_\_\_\_\_ my coverage?  
 What \_\_\_\_\_ I get \_\_\_\_\_ covered?

Will I be \_\_\_\_\_ not get \_\_\_\_\_?

\_\_\_\_\_ I get \_\_\_\_\_ find out \_\_\_\_\_ plan actually \_\_\_\_\_ it, what will \_\_\_\_\_?

\_\_\_\_\_ I get \_\_\_\_\_ without approval \_\_\_\_\_ is \_\_\_\_\_ what will \_\_\_\_\_?

\_\_\_\_\_ my \_\_\_\_\_ there \_\_\_\_\_ I \_\_\_\_\_ treatment without prior approval?

\_\_\_\_\_ there \_\_\_\_\_ I still \_\_\_\_\_ it covered?

If \_\_\_\_\_ receive \_\_\_\_\_ without prior approval, does \_\_\_\_\_ still \_\_\_\_\_?

\_\_\_\_\_ my insurance cover the \_\_\_\_\_ if \_\_\_\_\_ don't \_\_\_\_\_?

If it's \_\_\_\_\_ a benefit \_\_\_\_\_ it's \_\_\_\_\_ before \_\_\_\_\_ authorization, what happens?

What \_\_\_\_\_ I \_\_\_\_\_ coverage under my \_\_\_\_\_ treatment \_\_\_\_\_ not need prior approval?

Would the plan cover \_\_\_\_\_?

If I \_\_\_\_\_ treatment without \_\_\_\_\_ and it \_\_\_\_\_ out \_\_\_\_\_ covered \_\_\_\_\_ I do?

\_\_\_\_\_ I \_\_\_\_\_ for benefits \_\_\_\_\_ my \_\_\_\_\_ if \_\_\_\_\_ is rendered \_\_\_\_\_ proper authorization is obtained?

What happens \_\_\_\_\_ me \_\_\_\_\_ treatment \_\_\_\_\_ authorized \_\_\_\_\_ by insurance?

\_\_\_\_\_ get \_\_\_\_\_ pre-authorization \_\_\_\_\_ realize \_\_\_\_\_ was covered, what happens?

\_\_\_\_\_ know if my \_\_\_\_\_ if I do not get \_\_\_\_\_ first.

\_\_\_\_\_ getting \_\_\_\_\_ medical procedure without pre-approval \_\_\_\_\_?

\_\_\_\_\_ the treatment \_\_\_\_\_ plan \_\_\_\_\_ I don't get \_\_\_\_\_?

\_\_\_\_\_ service be \_\_\_\_\_ by my \_\_\_\_\_ if it \_\_\_\_\_ have \_\_\_\_\_?

If \_\_\_\_\_ plan's benefits include \_\_\_\_\_ that wasn't \_\_\_\_\_ my coverage?

\_\_\_\_\_ my \_\_\_\_\_ for \_\_\_\_\_ of services \_\_\_\_\_ pre-authorization?

\_\_\_\_\_ plan covered \_\_\_\_\_ services without \_\_\_\_\_?

\_\_\_\_\_ a \_\_\_\_\_ paid by my \_\_\_\_\_ if it \_\_\_\_\_?

\_\_\_\_\_ treatments performed \_\_\_\_\_ prove \_\_\_\_\_ be \_\_\_\_\_ limits, what \_\_\_\_\_ the policy?

If \_\_\_\_\_ have a procedure \_\_\_\_\_ and it's within \_\_\_\_\_ plan's coverage, \_\_\_\_\_ going \_\_\_\_\_?

Does \_\_\_\_\_ cover my \_\_\_\_\_ I don't have \_\_\_\_\_?

If it's listed \_\_\_\_\_ benefit on my \_\_\_\_\_ but I'm \_\_\_\_\_ receiving \_\_\_\_\_?

\_\_\_\_\_ treatment covered if there \_\_\_\_\_?

If I receive treatment \_\_\_\_\_ turns \_\_\_\_\_ to \_\_\_\_\_ a \_\_\_\_\_ service under \_\_\_\_\_ plan, \_\_\_\_\_ should \_\_\_\_\_?

\_\_\_\_\_ the plan \_\_\_\_\_ to cover \_\_\_\_\_?

What happens \_\_\_\_\_ I \_\_\_\_\_ and \_\_\_\_\_ a covered service?

What happens \_\_\_\_\_ plan \_\_\_\_\_ covers unauthorized treatment?

Is \_\_\_\_\_ if I receive \_\_\_\_\_?

\_\_\_\_\_ we \_\_\_\_\_ if an \_\_\_\_\_ procedure \_\_\_\_\_ covered?

Can \_\_\_\_\_ still \_\_\_\_\_ pay \_\_\_\_\_ help without permission?

Will the treatment be included \_\_\_\_\_ I \_\_\_\_\_ pre-authorization?

Is my \_\_\_\_\_ without \_\_\_\_\_?

\_\_\_\_\_ if \_\_\_\_\_ treatment is \_\_\_\_\_ authorized but covered by \_\_\_\_\_?

\_\_\_\_\_ I \_\_\_\_\_ plan pay \_\_\_\_\_ can I \_\_\_\_\_ without permission?

If the treatment was \_\_\_\_\_ authorized \_\_\_\_\_ my \_\_\_\_\_ I \_\_\_\_\_?

\_\_\_\_\_ I get treatment \_\_\_\_\_ plan, what happens?

\_\_\_\_\_ it possible \_\_\_\_\_ me to get help without my \_\_\_\_\_?

Does \_\_\_\_\_ for coverage for \_\_\_\_\_ pre-authorization?

\_\_\_\_\_ to me if \_\_\_\_\_ isn't \_\_\_\_\_ but falls \_\_\_\_\_?

\_\_\_\_\_ the \_\_\_\_\_ service still \_\_\_\_\_ covered if \_\_\_\_\_ done \_\_\_\_\_ pre-authorization?

what \_\_\_\_\_ if an unsanctioned \_\_\_\_\_?

Will \_\_\_\_\_ therapy if I don't get pre-authorization \_\_\_\_\_?

\_\_\_\_\_ I \_\_\_\_\_ service that \_\_\_\_\_ not approved \_\_\_\_\_ but \_\_\_\_\_ included in \_\_\_\_\_ benefits, what \_\_\_\_\_ to my \_\_\_\_\_?

\_\_\_\_\_ have a procedure without my \_\_\_\_\_ it's covered by \_\_\_\_\_ what \_\_\_\_\_?

\_\_\_\_\_ I \_\_\_\_\_ procedure \_\_\_\_\_ approval but it's \_\_\_\_\_ am I in for?

Does my \_\_\_\_\_ cover the \_\_\_\_\_ don't have prior \_\_\_\_\_?

\_\_\_\_\_ have \_\_\_\_\_ without approval \_\_\_\_\_ it is within my plan's \_\_\_\_\_ do?  
 \_\_\_\_\_ treated \_\_\_\_\_ getting authorization \_\_\_\_\_ it's \_\_\_\_\_ as a benefit, \_\_\_\_\_?  
 When I \_\_\_\_\_ treatment without \_\_\_\_\_ happens \_\_\_\_\_ was \_\_\_\_\_ all along?  
 If \_\_\_\_\_ procedure without approval but \_\_\_\_\_ within my \_\_\_\_\_ in for?  
 What if I'm \_\_\_\_\_ permission, \_\_\_\_\_ actually covers \_\_\_\_\_?  
 \_\_\_\_\_ I undergo a \_\_\_\_\_ that \_\_\_\_\_ approved \_\_\_\_\_ in \_\_\_\_\_ plan's \_\_\_\_\_ what will happen \_\_\_\_\_ my coverage?  
 \_\_\_\_\_ I \_\_\_\_\_ coverage \_\_\_\_\_ if the \_\_\_\_\_ was \_\_\_\_\_ by my \_\_\_\_\_?  
 If \_\_\_\_\_ don't \_\_\_\_\_ hoops and get \_\_\_\_\_ only to \_\_\_\_\_ it's \_\_\_\_\_ what would you think  
 What do I \_\_\_\_\_ the \_\_\_\_\_ after \_\_\_\_\_ receive treatment \_\_\_\_\_ does not require \_\_\_\_\_ approval?  
 \_\_\_\_\_ still cover \_\_\_\_\_ cost of \_\_\_\_\_ treatment if \_\_\_\_\_ don't \_\_\_\_\_ authorization?  
 \_\_\_\_\_ plan \_\_\_\_\_ services that \_\_\_\_\_ pre-authorization?  
 Does \_\_\_\_\_ cover services \_\_\_\_\_ without \_\_\_\_\_?  
 What \_\_\_\_\_ unauthorized \_\_\_\_\_ that \_\_\_\_\_ covers?  
 \_\_\_\_\_ my insurance \_\_\_\_\_ treatment \_\_\_\_\_ approval?  
 Will \_\_\_\_\_ medical procedure \_\_\_\_\_ a pre-approved \_\_\_\_\_ insurance \_\_\_\_\_?  
 If \_\_\_\_\_ receive \_\_\_\_\_ and it \_\_\_\_\_ out \_\_\_\_\_ covered service, \_\_\_\_\_ would happen?  
 If I \_\_\_\_\_ without prior approval, does my \_\_\_\_\_ still \_\_\_\_\_?  
 What happens \_\_\_\_\_ my \_\_\_\_\_ if \_\_\_\_\_ that I \_\_\_\_\_ approve \_\_\_\_\_ is \_\_\_\_\_ in \_\_\_\_\_ plan's \_\_\_\_\_?  
 \_\_\_\_\_ I undergo a procedure \_\_\_\_\_ plan's \_\_\_\_\_ what am \_\_\_\_\_ for?  
 \_\_\_\_\_ I get \_\_\_\_\_ treatment that turns out to be a \_\_\_\_\_ service \_\_\_\_\_ do?  
 \_\_\_\_\_ I going to \_\_\_\_\_ if I \_\_\_\_\_ a \_\_\_\_\_ it's \_\_\_\_\_ my plan?  
 I don't \_\_\_\_\_ what \_\_\_\_\_ I \_\_\_\_\_ treated \_\_\_\_\_ permission \_\_\_\_\_ find \_\_\_\_\_ my plan \_\_\_\_\_ covers it.  
 \_\_\_\_\_ I \_\_\_\_\_ what \_\_\_\_\_ when I find \_\_\_\_\_ it was covered?  
 If \_\_\_\_\_ receive \_\_\_\_\_ covered \_\_\_\_\_ my \_\_\_\_\_ what happens?  
 \_\_\_\_\_ without \_\_\_\_\_ realize it was covered.  
 If \_\_\_\_\_ benefits \_\_\_\_\_ a service that \_\_\_\_\_ before, what \_\_\_\_\_ happen to \_\_\_\_\_?  
 \_\_\_\_\_ I \_\_\_\_\_ if the \_\_\_\_\_ was not \_\_\_\_\_?  
 \_\_\_\_\_ it possible to get \_\_\_\_\_ without \_\_\_\_\_ still \_\_\_\_\_ my \_\_\_\_\_ pay \_\_\_\_\_?  
 \_\_\_\_\_ treated \_\_\_\_\_ receiving \_\_\_\_\_ but \_\_\_\_\_ listed on my \_\_\_\_\_ a benefit, what \_\_\_\_\_?  
 What do \_\_\_\_\_ know about the \_\_\_\_\_ under my \_\_\_\_\_ when \_\_\_\_\_ does not \_\_\_\_\_ prior \_\_\_\_\_?  
 \_\_\_\_\_ do I \_\_\_\_\_ the \_\_\_\_\_ service \_\_\_\_\_ my plan when I \_\_\_\_\_ without \_\_\_\_\_?  
 \_\_\_\_\_ I \_\_\_\_\_ my treatment \_\_\_\_\_ I don't get \_\_\_\_\_?  
 If treatment is \_\_\_\_\_ authorized \_\_\_\_\_ happen to me?  
 \_\_\_\_\_ to me if treatment \_\_\_\_\_ falls under insurance?  
 \_\_\_\_\_ plan include coverage for \_\_\_\_\_?  
 Is \_\_\_\_\_ possible \_\_\_\_\_ have \_\_\_\_\_ if treatment is \_\_\_\_\_?  
 \_\_\_\_\_ treatment \_\_\_\_\_ covered by \_\_\_\_\_ plan?  
 Does \_\_\_\_\_ cover \_\_\_\_\_ a procedure even if \_\_\_\_\_ have prior \_\_\_\_\_?  
 What \_\_\_\_\_ if it's listed \_\_\_\_\_ my \_\_\_\_\_ as a benefit but \_\_\_\_\_?  
 \_\_\_\_\_ it's listed \_\_\_\_\_ a \_\_\_\_\_ on \_\_\_\_\_ plan, what happens?  
 Will my \_\_\_\_\_ a \_\_\_\_\_ it \_\_\_\_\_ have pre-approval?  
 \_\_\_\_\_ want to know \_\_\_\_\_ be \_\_\_\_\_ if I haven't gotten pre-authorization \_\_\_\_\_.  
 \_\_\_\_\_ services if they \_\_\_\_\_ pre-approved?  
 What \_\_\_\_\_ in \_\_\_\_\_ when \_\_\_\_\_ a procedure without \_\_\_\_\_ but \_\_\_\_\_ it's \_\_\_\_\_ plan's coverage?  
 \_\_\_\_\_ happens \_\_\_\_\_ coverage if \_\_\_\_\_ that \_\_\_\_\_ before \_\_\_\_\_ included \_\_\_\_\_ my plan's benefits?  
 \_\_\_\_\_ undergo \_\_\_\_\_ procedure \_\_\_\_\_ approval \_\_\_\_\_ it is covered by \_\_\_\_\_ plan, what \_\_\_\_\_ I \_\_\_\_\_ do?  
 Does \_\_\_\_\_ plan \_\_\_\_\_ services that don't \_\_\_\_\_ pre-authorization?  
 If I \_\_\_\_\_ turns out \_\_\_\_\_ be a \_\_\_\_\_ service \_\_\_\_\_ my \_\_\_\_\_ do \_\_\_\_\_ do?  
 \_\_\_\_\_ service still \_\_\_\_\_ covered if \_\_\_\_\_ is \_\_\_\_\_ before pre-authorization \_\_\_\_\_?  
 If it's listed as \_\_\_\_\_ benefit on \_\_\_\_\_ when \_\_\_\_\_ treated \_\_\_\_\_ receiving \_\_\_\_\_?

\_\_\_\_\_ I \_\_\_\_\_ if \_\_\_\_\_ a \_\_\_\_\_ without approval \_\_\_\_\_ it's covered by my \_\_\_\_\_?  
 \_\_\_\_\_ I \_\_\_\_\_ even \_\_\_\_\_ the treatment \_\_\_\_\_ authorized by \_\_\_\_\_ plan?  
 If I \_\_\_\_\_ it \_\_\_\_\_ to \_\_\_\_\_ covered service, what happens?  
 What happens to unauthorized \_\_\_\_\_ covered \_\_\_\_\_ plan?  
 I \_\_\_\_\_ know what to \_\_\_\_\_ I get \_\_\_\_\_ without \_\_\_\_\_ and find out \_\_\_\_\_ plan \_\_\_\_\_.  
 \_\_\_\_\_ a \_\_\_\_\_ isn't approved before but is included in my plan's \_\_\_\_\_ to \_\_\_\_\_?  
 \_\_\_\_\_ receiving a \_\_\_\_\_ procedure if \_\_\_\_\_ not pre-approved \_\_\_\_\_ my \_\_\_\_\_?  
 \_\_\_\_\_ my health \_\_\_\_\_ still cover my treatment \_\_\_\_\_ approval?  
 Does my \_\_\_\_\_ for \_\_\_\_\_ aren't pre-authorization?  
 \_\_\_\_\_ treatment \_\_\_\_\_ on my plan if \_\_\_\_\_ pre-authorization?  
 \_\_\_\_\_ an unsanctioned procedure becomes \_\_\_\_\_?  
 \_\_\_\_\_ do \_\_\_\_\_ if my \_\_\_\_\_ will \_\_\_\_\_ cover treatment \_\_\_\_\_ I skip \_\_\_\_\_.  
 Is \_\_\_\_\_ covered \_\_\_\_\_ that were not \_\_\_\_\_?  
 \_\_\_\_\_ my coverage if \_\_\_\_\_ plan's \_\_\_\_\_ include a \_\_\_\_\_ wasn't approved \_\_\_\_\_?  
 \_\_\_\_\_ I \_\_\_\_\_ the covered service under my plan when \_\_\_\_\_ receive \_\_\_\_\_ does \_\_\_\_\_ require \_\_\_\_\_ approval?  
 \_\_\_\_\_ happens to \_\_\_\_\_ if \_\_\_\_\_ treatment isn't \_\_\_\_\_ covered by \_\_\_\_\_?  
 \_\_\_\_\_ I get \_\_\_\_\_ without \_\_\_\_\_ and \_\_\_\_\_ my plan \_\_\_\_\_ it, \_\_\_\_\_ should \_\_\_\_\_ do?  
 So, what if I \_\_\_\_\_ without \_\_\_\_\_ find \_\_\_\_\_ plan \_\_\_\_\_ it?  
 \_\_\_\_\_ I expect coverage \_\_\_\_\_ if \_\_\_\_\_ not authorized?  
 What \_\_\_\_\_ isn't \_\_\_\_\_ yet, but \_\_\_\_\_ by \_\_\_\_\_ policy?  
 \_\_\_\_\_ want to \_\_\_\_\_ if I \_\_\_\_\_ covered \_\_\_\_\_ my treatment if \_\_\_\_\_ have \_\_\_\_\_ gotten \_\_\_\_\_.  
 \_\_\_\_\_ have a procedure without approval but \_\_\_\_\_ plan's \_\_\_\_\_ what \_\_\_\_\_ I \_\_\_\_\_?  
 \_\_\_\_\_ receiving \_\_\_\_\_ procedure that \_\_\_\_\_ my insurance coverage?  
 What happens \_\_\_\_\_ isn't \_\_\_\_\_ is \_\_\_\_\_ by \_\_\_\_\_ policy?  
 \_\_\_\_\_ it \_\_\_\_\_ get help \_\_\_\_\_ and \_\_\_\_\_ plan pay for it?  
 \_\_\_\_\_ skip pre-authorization, \_\_\_\_\_ my \_\_\_\_\_ still \_\_\_\_\_?  
 If I'm treated \_\_\_\_\_ receiving \_\_\_\_\_ listed \_\_\_\_\_ a \_\_\_\_\_ on \_\_\_\_\_ what will \_\_\_\_\_?  
 Does \_\_\_\_\_ health \_\_\_\_\_ for \_\_\_\_\_ if \_\_\_\_\_ have prior approval?  
 \_\_\_\_\_ without \_\_\_\_\_ what if my plan \_\_\_\_\_ it?  
 \_\_\_\_\_ to \_\_\_\_\_ if my \_\_\_\_\_ treatment if I \_\_\_\_\_ pre-authorization.  
 If \_\_\_\_\_ treatment is \_\_\_\_\_ my plan but \_\_\_\_\_ not get \_\_\_\_\_ will \_\_\_\_\_?  
 If it's \_\_\_\_\_ plan \_\_\_\_\_ a \_\_\_\_\_ will \_\_\_\_\_ if I'm treated \_\_\_\_\_ receiving \_\_\_\_\_?  
 If \_\_\_\_\_ get pre-authorization, \_\_\_\_\_ treatment be included \_\_\_\_\_ plan?  
 It \_\_\_\_\_ listed \_\_\_\_\_ on my plan, but \_\_\_\_\_ if \_\_\_\_\_ treated before receiving \_\_\_\_\_?  
 \_\_\_\_\_ it if I roll \_\_\_\_\_ dice and \_\_\_\_\_ treated first?  
 If a service \_\_\_\_\_ going \_\_\_\_\_ pre-authorization \_\_\_\_\_ it \_\_\_\_\_ be \_\_\_\_\_?  
 \_\_\_\_\_ it's listed as \_\_\_\_\_ benefit \_\_\_\_\_ plan \_\_\_\_\_ I'm treated \_\_\_\_\_ what happens?  
 \_\_\_\_\_ it \_\_\_\_\_ for me \_\_\_\_\_ get help \_\_\_\_\_ permission, and have \_\_\_\_\_ pay \_\_\_\_\_?  
 If \_\_\_\_\_ didn't authorize \_\_\_\_\_ expect it to \_\_\_\_\_ covered?  
 Does my plan \_\_\_\_\_ coverage \_\_\_\_\_ that \_\_\_\_\_ pre-authorization?  
 \_\_\_\_\_ my \_\_\_\_\_ insurance coverage still \_\_\_\_\_ I \_\_\_\_\_ prior approval?  
 If I \_\_\_\_\_ turns \_\_\_\_\_ be \_\_\_\_\_ under my plan, \_\_\_\_\_ I do?  
 \_\_\_\_\_ issue when \_\_\_\_\_ get a \_\_\_\_\_ service with no \_\_\_\_\_?  
 Does \_\_\_\_\_ to \_\_\_\_\_ treatments without \_\_\_\_\_ approval?  
 \_\_\_\_\_ the \_\_\_\_\_ services \_\_\_\_\_ were \_\_\_\_\_ pre-approved?  
 It's listed \_\_\_\_\_ a benefit \_\_\_\_\_ what happens \_\_\_\_\_ before receiving \_\_\_\_\_?  
 \_\_\_\_\_ I \_\_\_\_\_ treatment that is covered \_\_\_\_\_ my plan?  
 \_\_\_\_\_ after unauthorized \_\_\_\_\_ is \_\_\_\_\_ by my \_\_\_\_\_?  
 What if \_\_\_\_\_ plan \_\_\_\_\_ not \_\_\_\_\_ for \_\_\_\_\_ treatment?  
 \_\_\_\_\_ it's listed as a benefit on \_\_\_\_\_ if I'm \_\_\_\_\_ authorization?

What happens when treatment is not \_\_\_\_\_?  
 \_\_\_\_\_ be covered if I don't \_\_\_\_\_ the \_\_\_\_\_?  
 \_\_\_\_\_ the \_\_\_\_\_ paid by \_\_\_\_\_ even if it lacks \_\_\_\_\_?  
 If \_\_\_\_\_ get \_\_\_\_\_ without \_\_\_\_\_ find \_\_\_\_\_ plan actually \_\_\_\_\_ it, \_\_\_\_\_ I do?  
 I want to \_\_\_\_\_ I'll be \_\_\_\_\_ treatment if \_\_\_\_\_ first.  
 Should \_\_\_\_\_ cover treatment even \_\_\_\_\_ skip pre-authorization?  
 When I receive \_\_\_\_\_ was \_\_\_\_\_ what happens?  
 When \_\_\_\_\_ get \_\_\_\_\_ I realize it was \_\_\_\_\_.  
 \_\_\_\_\_ if I'll get covered \_\_\_\_\_ if \_\_\_\_\_ don't get \_\_\_\_\_ first.  
 \_\_\_\_\_ I \_\_\_\_\_ covered if \_\_\_\_\_ receive pre-authorization \_\_\_\_\_?  
 \_\_\_\_\_ happens if \_\_\_\_\_ is covered by \_\_\_\_\_ plan.  
 \_\_\_\_\_ my \_\_\_\_\_ cover \_\_\_\_\_ that haven't \_\_\_\_\_?  
 I \_\_\_\_\_ to know \_\_\_\_\_ I'll be covered \_\_\_\_\_ I \_\_\_\_\_ pre-authorization \_\_\_\_\_.  
 Do I \_\_\_\_\_ coverage if \_\_\_\_\_ get \_\_\_\_\_ my treatment?  
 Could \_\_\_\_\_ without pre-authorization \_\_\_\_\_ for \_\_\_\_\_?  
 What happens to \_\_\_\_\_ if \_\_\_\_\_ service \_\_\_\_\_ not \_\_\_\_\_ before \_\_\_\_\_ my plan?  
 \_\_\_\_\_ my \_\_\_\_\_ reimburse \_\_\_\_\_ without \_\_\_\_\_?  
 \_\_\_\_\_ my \_\_\_\_\_ capable \_\_\_\_\_ covering \_\_\_\_\_ without pre-authorization?  
 What happens \_\_\_\_\_ me if \_\_\_\_\_ authorized and \_\_\_\_\_ falls \_\_\_\_\_?  
 \_\_\_\_\_ know \_\_\_\_\_ the coverage \_\_\_\_\_ plan \_\_\_\_\_ I receive treatment that does not \_\_\_\_\_?  
 \_\_\_\_\_ it possible for me \_\_\_\_\_ without \_\_\_\_\_ consent and \_\_\_\_\_ for under my \_\_\_\_\_?  
 \_\_\_\_\_ my health \_\_\_\_\_ cover my \_\_\_\_\_ not \_\_\_\_\_ prior approval?  
 What \_\_\_\_\_ authorized but \_\_\_\_\_ under the insurance?  
 Can \_\_\_\_\_ me if there \_\_\_\_\_ if \_\_\_\_\_ is provided \_\_\_\_\_ permission?  
 \_\_\_\_\_ if I \_\_\_\_\_ without \_\_\_\_\_ I \_\_\_\_\_ out my \_\_\_\_\_ actually \_\_\_\_\_ it?  
 \_\_\_\_\_ that \_\_\_\_\_ approved before \_\_\_\_\_ included in \_\_\_\_\_ benefits, what \_\_\_\_\_ my coverage?  
 \_\_\_\_\_ I \_\_\_\_\_ treated without permission and my \_\_\_\_\_ covers it, \_\_\_\_\_?  
 Is \_\_\_\_\_ covered \_\_\_\_\_ get \_\_\_\_\_ but without \_\_\_\_\_?  
 \_\_\_\_\_ I \_\_\_\_\_ procedure without \_\_\_\_\_ knowledge but discover it's \_\_\_\_\_ by \_\_\_\_\_ what am \_\_\_\_\_ in \_\_\_\_\_?  
 Will receiving \_\_\_\_\_ procedure that \_\_\_\_\_ not pre-approved affect \_\_\_\_\_?  
 \_\_\_\_\_ treatment lacks pre-approval but \_\_\_\_\_ coverage \_\_\_\_\_ can \_\_\_\_\_ still \_\_\_\_\_?  
 \_\_\_\_\_ happens to \_\_\_\_\_ it's covered by \_\_\_\_\_ plan?  
 \_\_\_\_\_ covered for my treatment \_\_\_\_\_ get pre-authorization first?  
 \_\_\_\_\_ get \_\_\_\_\_ does \_\_\_\_\_ require \_\_\_\_\_ approval, what do \_\_\_\_\_ do under \_\_\_\_\_ plan?  
 \_\_\_\_\_ insurance \_\_\_\_\_ me even \_\_\_\_\_ I don't get \_\_\_\_\_ approval?  
 Does my \_\_\_\_\_ without pre-authorization?  
 \_\_\_\_\_ my policy still \_\_\_\_\_ if a service \_\_\_\_\_ but \_\_\_\_\_?  
 What happens \_\_\_\_\_ me if \_\_\_\_\_ still falls under \_\_\_\_\_?  
 \_\_\_\_\_ treatment wasn't \_\_\_\_\_ by my plan \_\_\_\_\_ expect \_\_\_\_\_?  
 \_\_\_\_\_ I don't \_\_\_\_\_ through all your hoops and get \_\_\_\_\_ to discover \_\_\_\_\_ covered, \_\_\_\_\_ think?  
 If \_\_\_\_\_ is \_\_\_\_\_ my \_\_\_\_\_ pre-authorization, what will I \_\_\_\_\_?  
 What \_\_\_\_\_ if I get \_\_\_\_\_ isn't \_\_\_\_\_ but \_\_\_\_\_ in \_\_\_\_\_ plan's benefits?  
 \_\_\_\_\_ I get treatment \_\_\_\_\_ pre-authorization \_\_\_\_\_ will \_\_\_\_\_ out \_\_\_\_\_ a covered service \_\_\_\_\_.  
 Will I be \_\_\_\_\_ if \_\_\_\_\_ don't \_\_\_\_\_ the treatment \_\_\_\_\_?  
 \_\_\_\_\_ it's covered, \_\_\_\_\_ I get treatment without \_\_\_\_\_?  
 Will \_\_\_\_\_ insured for my treatment \_\_\_\_\_ I \_\_\_\_\_ get \_\_\_\_\_?  
 \_\_\_\_\_ is \_\_\_\_\_ but \_\_\_\_\_ pre-approved, what happens?  
 \_\_\_\_\_ approved before is included \_\_\_\_\_ my plan's benefits, \_\_\_\_\_ I do with my \_\_\_\_\_?  
 \_\_\_\_\_ plan is \_\_\_\_\_ what if I get \_\_\_\_\_ permission?  
 \_\_\_\_\_ for coverage if \_\_\_\_\_ treatment lacks pre-approval?



Can \_\_\_\_\_ receive treatment if \_\_\_\_\_ have pre-authorization?  
 \_\_\_\_\_ would like to \_\_\_\_\_ be covered for \_\_\_\_\_ if \_\_\_\_\_ gotten \_\_\_\_\_.

I \_\_\_\_\_ like to find \_\_\_\_\_ actually covers it \_\_\_\_\_ I \_\_\_\_\_ without \_\_\_\_\_.

\_\_\_\_\_ my insurance \_\_\_\_\_ the cost of \_\_\_\_\_ if \_\_\_\_\_ don't get \_\_\_\_\_?

\_\_\_\_\_ I don't \_\_\_\_\_ pre-authorization, will the treatment be \_\_\_\_\_?

\_\_\_\_\_ I don't jump \_\_\_\_\_ hoops \_\_\_\_\_ treated only \_\_\_\_\_ find \_\_\_\_\_ later that it's \_\_\_\_\_ you think

Suppose I \_\_\_\_\_ treated without \_\_\_\_\_ and \_\_\_\_\_ out \_\_\_\_\_ actually \_\_\_\_\_ it?

What \_\_\_\_\_ my coverage if \_\_\_\_\_ is included \_\_\_\_\_ my plan's \_\_\_\_\_ wasn't \_\_\_\_\_ before?

\_\_\_\_\_ I \_\_\_\_\_ pre-authorization, \_\_\_\_\_ plan will still \_\_\_\_\_?

\_\_\_\_\_ get \_\_\_\_\_ and \_\_\_\_\_ out to be covered \_\_\_\_\_ what should I \_\_\_\_\_?

\_\_\_\_\_ I receive treatment without \_\_\_\_\_ approval, do \_\_\_\_\_ health \_\_\_\_\_ still \_\_\_\_\_?

\_\_\_\_\_ happens if \_\_\_\_\_ covered service under my \_\_\_\_\_?

What happens when \_\_\_\_\_ treatment \_\_\_\_\_ but \_\_\_\_\_ insurance?

What \_\_\_\_\_ the service \_\_\_\_\_ without \_\_\_\_\_?

\_\_\_\_\_ I \_\_\_\_\_ my \_\_\_\_\_ I get \_\_\_\_\_ that doesn't require approval?

If treatment \_\_\_\_\_ under \_\_\_\_\_ will happen to me?

\_\_\_\_\_ a \_\_\_\_\_ procedure covered by \_\_\_\_\_ it's not \_\_\_\_\_?

Even \_\_\_\_\_ the treatment was \_\_\_\_\_ I expect \_\_\_\_\_?

\_\_\_\_\_ would happen \_\_\_\_\_ the service \_\_\_\_\_?

\_\_\_\_\_ if \_\_\_\_\_ treated without permission \_\_\_\_\_ discover my \_\_\_\_\_ it?

If I skip \_\_\_\_\_ plan \_\_\_\_\_ me?

If it's listed \_\_\_\_\_ my plan as \_\_\_\_\_ I'm \_\_\_\_\_ before \_\_\_\_\_ authorization, \_\_\_\_\_?

Is \_\_\_\_\_ if \_\_\_\_\_ get a covered service without \_\_\_\_\_?

\_\_\_\_\_ I still get \_\_\_\_\_ my \_\_\_\_\_ if \_\_\_\_\_ service \_\_\_\_\_ before proper authorization \_\_\_\_\_?

Do my insurance \_\_\_\_\_ cover \_\_\_\_\_ cost \_\_\_\_\_ a \_\_\_\_\_ don't get \_\_\_\_\_?

What \_\_\_\_\_ service is \_\_\_\_\_ but not \_\_\_\_\_?

\_\_\_\_\_ I \_\_\_\_\_ medical \_\_\_\_\_ without getting it pre-approved, \_\_\_\_\_ insurance cover \_\_\_\_\_?

\_\_\_\_\_ I \_\_\_\_\_ if \_\_\_\_\_ skip pre-authorization?

When my treatment does \_\_\_\_\_ prior approval, \_\_\_\_\_ do \_\_\_\_\_ plan?

What happens to me \_\_\_\_\_ is covered \_\_\_\_\_ insurance?

\_\_\_\_\_ plan \_\_\_\_\_ still \_\_\_\_\_ treatment if I \_\_\_\_\_.

\_\_\_\_\_ treatment covered if \_\_\_\_\_ pre-authorization?

Will I \_\_\_\_\_ covered if I \_\_\_\_\_ pre-authorization \_\_\_\_\_?

\_\_\_\_\_ my \_\_\_\_\_ cover certain services \_\_\_\_\_?

If I \_\_\_\_\_ turns \_\_\_\_\_ to \_\_\_\_\_ under my plan, what should \_\_\_\_\_?

If \_\_\_\_\_ a \_\_\_\_\_ without \_\_\_\_\_ within \_\_\_\_\_ coverage, what are I \_\_\_\_\_ for?

Is \_\_\_\_\_ paid \_\_\_\_\_ my plan \_\_\_\_\_ have prior consent?

\_\_\_\_\_ I \_\_\_\_\_ help \_\_\_\_\_ approval \_\_\_\_\_ have my \_\_\_\_\_ pay for \_\_\_\_\_?

\_\_\_\_\_ like \_\_\_\_\_ if \_\_\_\_\_ is included \_\_\_\_\_ my plan if I \_\_\_\_\_ pre-authorization.

\_\_\_\_\_ my plan \_\_\_\_\_ cover an \_\_\_\_\_ if \_\_\_\_\_ performed \_\_\_\_\_ pre-authorization?

I'd like to know if I'll \_\_\_\_\_ treatment if \_\_\_\_\_.

What happens \_\_\_\_\_ procedure \_\_\_\_\_ under \_\_\_\_\_?

\_\_\_\_\_ if the \_\_\_\_\_ covered \_\_\_\_\_ without \_\_\_\_\_?

\_\_\_\_\_ plan \_\_\_\_\_ services \_\_\_\_\_ though they were \_\_\_\_\_ pre-approved?

Does \_\_\_\_\_ insurance cover the cost \_\_\_\_\_ I \_\_\_\_\_?

\_\_\_\_\_ I covered \_\_\_\_\_ treatment if \_\_\_\_\_ get \_\_\_\_\_ first?

Will \_\_\_\_\_ be \_\_\_\_\_ treatment \_\_\_\_\_ not pre-authorization first?

\_\_\_\_\_ after an \_\_\_\_\_ procedure is \_\_\_\_\_?

Does my \_\_\_\_\_ the services \_\_\_\_\_?

If \_\_\_\_\_ a \_\_\_\_\_ without \_\_\_\_\_ but find out it's within \_\_\_\_\_ what \_\_\_\_\_ I in \_\_\_\_\_?

If \_\_\_\_ do \_\_\_\_ get pre-authorization, \_\_\_\_ my \_\_\_\_ in \_\_\_\_ plan?  
 What \_\_\_\_ to me if \_\_\_\_ authorized but \_\_\_\_?  
 \_\_\_\_ treated \_\_\_\_ receiving \_\_\_\_ but it's \_\_\_\_ as \_\_\_\_ benefit \_\_\_\_ plan, what would \_\_\_\_?  
 \_\_\_\_ should \_\_\_\_ to me if \_\_\_\_ but \_\_\_\_ by insurance?  
 \_\_\_\_ I \_\_\_\_ under my \_\_\_\_ covered \_\_\_\_ rendered before proper authorization is obtained?  
 I want \_\_\_\_ treatment will \_\_\_\_ if I don't \_\_\_\_ pre-authorization \_\_\_\_.  
 \_\_\_\_ insurance \_\_\_\_ the \_\_\_\_ of my \_\_\_\_ if I \_\_\_\_ have prior \_\_\_\_?  
 \_\_\_\_ procedure \_\_\_\_ by my insurance if I \_\_\_\_ it?  
 Is \_\_\_\_ for my plan \_\_\_\_ pay \_\_\_\_ help \_\_\_\_?  
 If I \_\_\_\_ without \_\_\_\_ but \_\_\_\_ covered, what do \_\_\_\_?  
 \_\_\_\_ it is listed as \_\_\_\_ benefit on \_\_\_\_ what will \_\_\_\_ am treated before \_\_\_\_?  
 What do \_\_\_\_ know \_\_\_\_ coverage under \_\_\_\_ when \_\_\_\_ receive treatment \_\_\_\_ does not \_\_\_\_ approval?  
 Should my \_\_\_\_ to \_\_\_\_ treatment \_\_\_\_ I skip \_\_\_\_?  
 If \_\_\_\_ treatment \_\_\_\_ is not \_\_\_\_ what \_\_\_\_ I do?  
 When I \_\_\_\_ knowing it \_\_\_\_ covered, what \_\_\_\_?  
 Could \_\_\_\_ without \_\_\_\_ still \_\_\_\_?  
 \_\_\_\_ unauthorized treatment \_\_\_\_ covered \_\_\_\_ my plan.  
 If there \_\_\_\_ no \_\_\_\_ still have \_\_\_\_ covered?  
 What should happen \_\_\_\_ isn't \_\_\_\_ and falls under \_\_\_\_?  
 \_\_\_\_ the plan cover services \_\_\_\_?  
 \_\_\_\_ if \_\_\_\_ treated \_\_\_\_ permission \_\_\_\_ find out \_\_\_\_ actually works?  
 If \_\_\_\_ and it turns \_\_\_\_ to \_\_\_\_ covered under \_\_\_\_ what \_\_\_\_?  
 \_\_\_\_ my plan covers \_\_\_\_ that \_\_\_\_ pre-approved, \_\_\_\_ happen?  
 What happens \_\_\_\_ unsanctioned procedure \_\_\_\_?  
 What \_\_\_\_ if my \_\_\_\_ is covered by insurance?  
 What \_\_\_\_ after \_\_\_\_ unauthorized \_\_\_\_ covered by my \_\_\_\_?  
 \_\_\_\_ I \_\_\_\_ get pre-authorization \_\_\_\_ the treatment, will \_\_\_\_ be \_\_\_\_?  
 Can an eligible \_\_\_\_ still \_\_\_\_ covered \_\_\_\_ performed \_\_\_\_?  
 Does \_\_\_\_ cost \_\_\_\_ treatment even though \_\_\_\_ don't have prior \_\_\_\_?  
 \_\_\_\_ the procedure covered \_\_\_\_ my insurance \_\_\_\_ I do \_\_\_\_?  
 \_\_\_\_ skip \_\_\_\_ will \_\_\_\_ plan cover my \_\_\_\_?  
 \_\_\_\_ will my \_\_\_\_ still cover?  
 \_\_\_\_ I still get benefits \_\_\_\_ plan \_\_\_\_ covered service \_\_\_\_ getting authorization?  
 Is \_\_\_\_ procedure covered by my insurance if \_\_\_\_?  
 What \_\_\_\_ doesn't include \_\_\_\_ for my \_\_\_\_?  
 \_\_\_\_ get covered \_\_\_\_ treatment if I \_\_\_\_ pre-authorization \_\_\_\_?  
 \_\_\_\_ plan \_\_\_\_ coverage \_\_\_\_ services without a \_\_\_\_?  
 \_\_\_\_ I skip \_\_\_\_ will my plan \_\_\_\_ treatment?  
 When \_\_\_\_ treatment \_\_\_\_ turns out \_\_\_\_ be a \_\_\_\_ service under my \_\_\_\_.  
 If \_\_\_\_ get \_\_\_\_ before \_\_\_\_ will \_\_\_\_ be covered?  
 \_\_\_\_ possible \_\_\_\_ if the \_\_\_\_ is provided \_\_\_\_ your permission?  
 What \_\_\_\_ I don't \_\_\_\_ my \_\_\_\_?  
 If I \_\_\_\_ get \_\_\_\_ first, will \_\_\_\_ be \_\_\_\_ treatment?  
 \_\_\_\_ I get help without \_\_\_\_ consent \_\_\_\_ have my \_\_\_\_ for \_\_\_\_?  
 \_\_\_\_ treatment \_\_\_\_ pre-authorization, \_\_\_\_ it a covered service?  
 \_\_\_\_ I have \_\_\_\_ there's no \_\_\_\_?  
 \_\_\_\_ treatment \_\_\_\_ not authorized by \_\_\_\_ plan, can \_\_\_\_?  
 \_\_\_\_ the \_\_\_\_ wasn't authorized \_\_\_\_ plan, can I \_\_\_\_ coverage?  
 \_\_\_\_ the service still be \_\_\_\_ before \_\_\_\_ is done?  
 If \_\_\_\_ not pre-authorization \_\_\_\_ will \_\_\_\_ for treatment?

Can \_\_\_\_ service \_\_\_\_ by \_\_\_\_ policy if \_\_\_\_ is \_\_\_\_ pre-approved?

What \_\_\_\_ get treated \_\_\_\_ permission \_\_\_\_ then \_\_\_\_ my \_\_\_\_ actually \_\_\_\_ it?

\_\_\_\_ I get treated without permission \_\_\_\_ plan \_\_\_\_ covers \_\_\_\_ what \_\_\_\_?

\_\_\_\_ treatment \_\_\_\_ pre-approved but \_\_\_\_ coverage \_\_\_\_ do \_\_\_\_ get coverage?

\_\_\_\_ my policy still \_\_\_\_ if it is not \_\_\_\_?

Can I expect coverage \_\_\_\_ the \_\_\_\_ authorized by \_\_\_\_?

If \_\_\_\_ pre-authorization, \_\_\_\_ the plan \_\_\_\_ my treatment?

\_\_\_\_ I \_\_\_\_ a \_\_\_\_ without my \_\_\_\_ but it's within my \_\_\_\_ I \_\_\_\_ for?

If I get \_\_\_\_ treatment that turns out to \_\_\_\_ what \_\_\_\_?

\_\_\_\_ be paid for by my policy \_\_\_\_ pre-approved?

\_\_\_\_ happen \_\_\_\_ an unsanctioned \_\_\_\_ under coverage?

If I undergo \_\_\_\_ approved \_\_\_\_ but is \_\_\_\_ my benefits, what \_\_\_\_ my coverage?

\_\_\_\_ treatment and \_\_\_\_ covered, what?

\_\_\_\_ happens to \_\_\_\_ if the \_\_\_\_ authorized but covered \_\_\_\_?

What do we \_\_\_\_ after \_\_\_\_ falls under \_\_\_\_?

\_\_\_\_ service isn't pre-approved \_\_\_\_ is covered?

\_\_\_\_ do \_\_\_\_ know \_\_\_\_ coverage \_\_\_\_ plan when I get treatment without \_\_\_\_?

Is my plan still able \_\_\_\_ I \_\_\_\_?

\_\_\_\_ I \_\_\_\_ pre-authorization, it will be a \_\_\_\_ service \_\_\_\_ my \_\_\_\_.

What \_\_\_\_ I do \_\_\_\_ don't need prior \_\_\_\_ my \_\_\_\_?

\_\_\_\_ still \_\_\_\_ as \_\_\_\_ benefit \_\_\_\_ plan if I'm \_\_\_\_ before receiving \_\_\_\_?

What happens \_\_\_\_ unauthorized \_\_\_\_ are covered \_\_\_\_.

Do \_\_\_\_ health insurance \_\_\_\_ me if \_\_\_\_ receive \_\_\_\_ without \_\_\_\_?

If I get a \_\_\_\_ but \_\_\_\_ am I going to \_\_\_\_?

\_\_\_\_ treatment be included in \_\_\_\_ plan \_\_\_\_ I don't \_\_\_\_?

I \_\_\_\_ to \_\_\_\_ will be covered for my \_\_\_\_ gotten pre-authorization \_\_\_\_.

If \_\_\_\_ a \_\_\_\_ without my \_\_\_\_ but it's within \_\_\_\_ plan's coverage, \_\_\_\_?

\_\_\_\_ procedure without \_\_\_\_ pre-approved by my insurance \_\_\_\_ my \_\_\_\_?

What \_\_\_\_ I \_\_\_\_ treatment that \_\_\_\_ on \_\_\_\_ plan.

If \_\_\_\_ eligible \_\_\_\_ is \_\_\_\_ before \_\_\_\_ it still be \_\_\_\_?

I want to know if \_\_\_\_ covered for \_\_\_\_ get \_\_\_\_ first.

\_\_\_\_ still get coverage \_\_\_\_ do \_\_\_\_ get pre-approval?

\_\_\_\_ not get pre-authorization before my treatment \_\_\_\_ will \_\_\_\_?

\_\_\_\_ under my plan still be \_\_\_\_ if \_\_\_\_ performed \_\_\_\_ pre-authorization?

\_\_\_\_ know if I \_\_\_\_ receive \_\_\_\_ and have it paid for \_\_\_\_ plan.

What about unauthorized \_\_\_\_ that \_\_\_\_ plan?

If it's covered in my \_\_\_\_ consequences \_\_\_\_?

If a \_\_\_\_ rendered \_\_\_\_ proper \_\_\_\_ are I \_\_\_\_ eligible for benefits \_\_\_\_ my plan?

What can happen \_\_\_\_ unauthorized treatment \_\_\_\_ plan.

\_\_\_\_ happens \_\_\_\_ I get treated without pre-authorization \_\_\_\_ it turns \_\_\_\_ a \_\_\_\_?

Can \_\_\_\_ plan \_\_\_\_ if I \_\_\_\_ the dice and \_\_\_\_?

Will \_\_\_\_ procedure without getting it \_\_\_\_ my \_\_\_\_?

\_\_\_\_ treatment is not \_\_\_\_ but \_\_\_\_ by my \_\_\_\_ what \_\_\_\_?

What \_\_\_\_ know \_\_\_\_ the service covered \_\_\_\_ my \_\_\_\_ I \_\_\_\_ that \_\_\_\_ require prior approval?

If I don't get \_\_\_\_ treatment, \_\_\_\_ it \_\_\_\_?

\_\_\_\_ I \_\_\_\_ require prior approval, what do I \_\_\_\_ about \_\_\_\_ covered \_\_\_\_ my plan?

Is \_\_\_\_ to \_\_\_\_ treatment paid for under \_\_\_\_ without \_\_\_\_?

Will \_\_\_\_ insurance \_\_\_\_ me down \_\_\_\_ I don't bother with \_\_\_\_?

\_\_\_\_ it \_\_\_\_ to \_\_\_\_ treatment \_\_\_\_ prior consent \_\_\_\_ paid for under my \_\_\_\_.

Is it possible \_\_\_\_ me to remain \_\_\_\_ lacks \_\_\_\_.

\_\_\_\_\_ happen \_\_\_\_\_ me if \_\_\_\_\_ not authorized \_\_\_\_\_ under insurance?  
 What if my \_\_\_\_\_ that \_\_\_\_\_ pre-approved?  
 What \_\_\_\_\_ a service \_\_\_\_\_ not pre-approved \_\_\_\_\_?  
 Will \_\_\_\_\_ paid by \_\_\_\_\_ even though it lacks \_\_\_\_\_?  
 \_\_\_\_\_ do I \_\_\_\_\_ under my plan \_\_\_\_\_ I \_\_\_\_\_ treatment \_\_\_\_\_ does \_\_\_\_\_ require prior approval?  
 \_\_\_\_\_ if \_\_\_\_\_ covers it when \_\_\_\_\_ treated without permission?  
 \_\_\_\_\_ happens after \_\_\_\_\_ un-sanctioned procedure \_\_\_\_\_?  
 If an \_\_\_\_\_ under \_\_\_\_\_ plan is performed \_\_\_\_\_ it be \_\_\_\_\_?  
 If there \_\_\_\_\_ no pre-authorization, can \_\_\_\_\_ and still \_\_\_\_\_?  
 What \_\_\_\_\_ coverage under my \_\_\_\_\_ when I \_\_\_\_\_ treatment \_\_\_\_\_ approval?  
 \_\_\_\_\_ be \_\_\_\_\_ when I don't \_\_\_\_\_?  
 Should \_\_\_\_\_ covered by my insurance \_\_\_\_\_ get it \_\_\_\_\_?  
 What \_\_\_\_\_ when \_\_\_\_\_ get \_\_\_\_\_ only \_\_\_\_\_ find out \_\_\_\_\_ was covered?  
 \_\_\_\_\_ I \_\_\_\_\_ get \_\_\_\_\_ will \_\_\_\_\_ be covered \_\_\_\_\_ treatment?  
 \_\_\_\_\_ treatment \_\_\_\_\_ is covered by my plan?  
 If I \_\_\_\_\_ procedure without approval but it's within \_\_\_\_\_ I \_\_\_\_\_?  
 \_\_\_\_\_ it \_\_\_\_\_ me to \_\_\_\_\_ treatment \_\_\_\_\_ plan without prior consent?  
 I want to \_\_\_\_\_ I \_\_\_\_\_ be covered \_\_\_\_\_ don't get \_\_\_\_\_ first.  
 \_\_\_\_\_ I get coverage \_\_\_\_\_ my \_\_\_\_\_ authorize \_\_\_\_\_ treatment?  
 \_\_\_\_\_ get \_\_\_\_\_ without \_\_\_\_\_ it \_\_\_\_\_ out to be a \_\_\_\_\_ service \_\_\_\_\_ plan.  
 Should I \_\_\_\_\_ be \_\_\_\_\_ if \_\_\_\_\_ is not \_\_\_\_\_?  
 \_\_\_\_\_ want \_\_\_\_\_ know if \_\_\_\_\_ get treated \_\_\_\_\_ and \_\_\_\_\_ plan actually \_\_\_\_\_ it.  
 \_\_\_\_\_ my \_\_\_\_\_ actually \_\_\_\_\_ what if I \_\_\_\_\_ without permission?  
 If \_\_\_\_\_ pre-authorization, \_\_\_\_\_ I \_\_\_\_\_ still have it paid for?  
 \_\_\_\_\_ I \_\_\_\_\_ treatment \_\_\_\_\_ prior \_\_\_\_\_ my \_\_\_\_\_ insurance still \_\_\_\_\_ me?  
 If \_\_\_\_\_ don't jump \_\_\_\_\_ your hoops and \_\_\_\_\_ treated \_\_\_\_\_ later on \_\_\_\_\_ covered, what would \_\_\_\_\_  
 \_\_\_\_\_ there is \_\_\_\_\_ on \_\_\_\_\_ service?  
 Is \_\_\_\_\_ procedure covered by my insurance \_\_\_\_\_?  
 \_\_\_\_\_ medical procedure \_\_\_\_\_ one affect my insurance?  
 \_\_\_\_\_ my \_\_\_\_\_ cover \_\_\_\_\_ that \_\_\_\_\_ a pre-authorization?  
 Will the service \_\_\_\_\_ by \_\_\_\_\_ policy \_\_\_\_\_ it \_\_\_\_\_ pre-approved?  
 \_\_\_\_\_ I receive \_\_\_\_\_ service \_\_\_\_\_ wasn't approved before but \_\_\_\_\_ in \_\_\_\_\_ benefits, \_\_\_\_\_ happens to \_\_\_\_\_?  
 If I don't \_\_\_\_\_ through all \_\_\_\_\_ and \_\_\_\_\_ only to find \_\_\_\_\_ later \_\_\_\_\_ it's \_\_\_\_\_ can \_\_\_\_\_  
 What \_\_\_\_\_ I get treatment \_\_\_\_\_ only \_\_\_\_\_ was covered?  
 If a \_\_\_\_\_ within my \_\_\_\_\_ coverage, but without \_\_\_\_\_ what \_\_\_\_\_?  
 \_\_\_\_\_ possible for me to \_\_\_\_\_ assistance without \_\_\_\_\_ my \_\_\_\_\_ pay for \_\_\_\_\_?  
 \_\_\_\_\_ my policy pay for \_\_\_\_\_ is \_\_\_\_\_ not pre-approved?  
 \_\_\_\_\_ a \_\_\_\_\_ without approval \_\_\_\_\_ it's \_\_\_\_\_ my plan's \_\_\_\_\_ am I in for?  
 Does \_\_\_\_\_ insurance pay \_\_\_\_\_ if I \_\_\_\_\_ prior authorization?  
 \_\_\_\_\_ treatment isn't authorized but \_\_\_\_\_ under \_\_\_\_\_ to me?  
 Should \_\_\_\_\_ medical \_\_\_\_\_ be covered by my \_\_\_\_\_ is \_\_\_\_\_ pre- \_\_\_\_\_?  
 What \_\_\_\_\_ to me \_\_\_\_\_ isn't authorized \_\_\_\_\_ falls \_\_\_\_\_ insurance?  
 If I \_\_\_\_\_ it turns \_\_\_\_\_ be covered by my \_\_\_\_\_ what \_\_\_\_\_?  
 Is \_\_\_\_\_ by \_\_\_\_\_ plan \_\_\_\_\_ I skip pre-authorization?  
 If \_\_\_\_\_ covered \_\_\_\_\_ is rendered before \_\_\_\_\_ authorization, \_\_\_\_\_ eligible for \_\_\_\_\_ my plan?  
 \_\_\_\_\_ my insurance \_\_\_\_\_ costs of a \_\_\_\_\_ I don't get \_\_\_\_\_?  
 If \_\_\_\_\_ no \_\_\_\_\_ can \_\_\_\_\_ have \_\_\_\_\_?  
 Is that \_\_\_\_\_ on \_\_\_\_\_ if \_\_\_\_\_ don't have \_\_\_\_\_?  
 I \_\_\_\_\_ if \_\_\_\_\_ permission \_\_\_\_\_ still have my plan pay \_\_\_\_\_ it.  
 \_\_\_\_\_ an issue if \_\_\_\_\_ get \_\_\_\_\_ covered \_\_\_\_\_ authorization?

\_\_\_\_\_ receiving authorization but \_\_\_\_\_ listed on my \_\_\_\_\_ what \_\_\_\_\_?

If there's \_\_\_\_\_ pre-authorization, can \_\_\_\_\_ still \_\_\_\_\_?

\_\_\_\_\_ receive \_\_\_\_\_ without \_\_\_\_\_ approval, does \_\_\_\_\_ health insurance \_\_\_\_\_ that?

What \_\_\_\_\_ treatment \_\_\_\_\_ on my plan \_\_\_\_\_ pre-approved?

\_\_\_\_\_ a medical \_\_\_\_\_ by \_\_\_\_\_ insurance if \_\_\_\_\_ it without getting \_\_\_\_\_?

\_\_\_\_\_ happens \_\_\_\_\_ coverage if I get \_\_\_\_\_ service that isn't approved \_\_\_\_\_ in \_\_\_\_\_ benefits?

What \_\_\_\_\_ my \_\_\_\_\_ is covered \_\_\_\_\_ don't have \_\_\_\_\_?

\_\_\_\_\_ happens \_\_\_\_\_ approved, but covered by my \_\_\_\_\_?

If \_\_\_\_\_ a benefit \_\_\_\_\_ happens if I am treated \_\_\_\_\_ receiving \_\_\_\_\_?

\_\_\_\_\_ my \_\_\_\_\_ cost \_\_\_\_\_ a treatment even if I \_\_\_\_\_ get \_\_\_\_\_?

Is \_\_\_\_\_ coverage if it lacks pre-approval?

What happens \_\_\_\_\_ covered by \_\_\_\_\_?

\_\_\_\_\_ if my \_\_\_\_\_ actually covered \_\_\_\_\_ treated \_\_\_\_\_ permission?

Do I \_\_\_\_\_ coverage if \_\_\_\_\_ lacks pre-approval?

\_\_\_\_\_ the service \_\_\_\_\_ my policy if it \_\_\_\_\_ without pre-approval?

What happens \_\_\_\_\_ if my treatment \_\_\_\_\_ under insurance?

Does my insurance \_\_\_\_\_ of a \_\_\_\_\_ if \_\_\_\_\_ don't have \_\_\_\_\_?

What \_\_\_\_\_ if \_\_\_\_\_ receive \_\_\_\_\_ turns \_\_\_\_\_ to \_\_\_\_\_ a covered \_\_\_\_\_?

Does \_\_\_\_\_ plan still \_\_\_\_\_ if I \_\_\_\_\_?

\_\_\_\_\_ treatment \_\_\_\_\_ it \_\_\_\_\_ to be covered \_\_\_\_\_ my \_\_\_\_\_ what will happen?