

[Demo] NLP Dataset for Customer Service Automation

Company Type	Pet Insurance Companies
Inquiry Category	Policy coverage for alternative therapies
Inquiry Sub-Category	Reimbursement for physical therapy and rehabilitation
Description	Customers want to know if their policy covers physical therapy and rehabilitation services for their pets, including the types of exercises or treatments that are eligible for reimbursement.
Data Size	5,624 paraphrases
Want to buy data?	Please contact nlp-data@gross.me via your business email address.

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

Are _____ sessions considered an eligible _____ this _____?

Does this _____ therapy?

Are _____ for reimbursement?

Are _____ lasers _____?

_____ treatments _____ be _____?

_____ coverage _____ this plan?

Will _____ sessions _____ by _____ plan?

I want to _____ if _____ reimbursements for laser _____.

_____ cover costs of _____ sessions?

Can _____ cover laser _____?

_____ laser therapy _____ this _____.

Can _____ fall _____ coverage guidelines?

_____ I allowed _____ claim _____ cost _____ treatments?

Does the _____ of _____ therapy count _____?

Laser therapy _____ be _____ this _____.

_____ this _____ the _____ of _____ therapy?

_____ laser _____ sessions _____ as _____ expenses?

_____ policy good for _____ therapy _____?

_____ plan _____ laser therapy coverage?

_____ sessions _____ laser _____ count?

_____ laser _____ covered _____ this _____?

_____ therapy expenses _____ in your _____?

_____ the _____ therapy sessions eligible _____?

_____ laser _____ sessions qualify for _____?

_____ policy cover _____ laser therapy _____?

Is _____ covering _____ treatments?

_____ my plan cover the _____?

_____ to _____ reimbursed _____ laser therapy here?

Is _____ covered _____ it?

_____ therapy covered _____ plan

The _____ laser therapy could be _____ in _____.

_____ session _____ therapy valid for _____?

Is _____ laser _____ session _____?

Are _____ therapy _____ by my _____.

Does the _____ coverage _____ therapy?

_____ included in my _____?

_____ would like to _____ therapy sessions are _____ eligible _____.

Will the _____ covered _____ this _____?

Are _____ therapies _____ scheme?

Is _____ list featuring laser _____?

Are _____ treatments approved _____ the _____?

_____ therapy can _____ considered _____ eligible _____.

Is _____ covered _____ this _____?

_____ okay to _____ for laser therapy _____?

_____ costs covered _____ policy?

Will _____ insurance _____ sessions _____ therapy?

Does laser _____ qualify _____ eligible _____?

Does _____ any _____ for laser therapy _____?

_____ help with _____ treatment expenses?

Laser treatments _____ by the _____.

Is _____ to _____ my _____ for laser _____.

Does _____ laser _____ treatments?

Will the _____ include the _____ sessions?

Does _____ treatment sessions.

Does my policy _____ costs _____?

_____ laser therapy _____ under the coverage _____ my _____?

_____ I eligible to _____ for _____?

_____ it okay for me _____ my policy _____ laser _____.

_____ treatment _____ under my plan?

Is _____ therapy _____ here?

Are laser _____ covered _____ plan?

Laser therapy sessions are _____ eligible _____.

Can I _____ the _____ with this.

_____ eligible for _____ for laser _____?

_____ laser _____ sessions considered _____ under this _____?

I _____ if laser treatments _____ my plan.

So do _____ sessions _____?

Is _____ therapy _____ an eligible _____?

_____ laser therapy _____ by _____ policy.

Is _____ therapy _____ my _____.

Does _____ eligibility criteria _____ the _____ therapy?

_____ sessions _____ laser therapy _____ qualify _____ reimbursement?

_____ I _____ claim for _____ therapy _____ on _____ insurance plan?

_____ plan cover laser _____?

_____ covered?

_____ my policy cover _____?

Does _____ policy _____ treatment?

Does _____ therapy?

Is _____ possible _____ be covered?

Is laser _____ insurance?

_____ cost of _____ in the eligibility criteria?

I was _____ if _____ claim _____ therapy _____.

This scheme _____ therapies.

_____ correct to claim _____ therapy _____?

Does _____ cover _____ Therapy _____?

Do _____ think _____ be eligible?

_____ laser therapy _____ Expenses?

Is _____ to _____ expenses here

_____ I _____ to _____ for laser _____?

Is this _____ covered _____?

Are _____ for expenses?

_____ I be reimbursed for _____ therapies?

This plan might _____.

_____ scheme _____ cover _____ therapies.

_____ laser _____ here?

_____ possible to _____ reimbursements for _____ therapies _____?

Is _____ by this _____?

_____ laser _____ this scheme?

_____ laser _____ included in my _____?

_____ plan _____ any laser therapy _____?

_____ to _____ if I can _____ laser therapy here.

_____ the coverage _____ sessions within _____ policy?

Are _____ able to _____ of _____ treatments?

_____ my plan cover _____ therapy _____?

_____ plan _____ laser treatments?

Does this _____ coverage for _____ therapy?

Will _____ for laser _____ sessions?

_____ of laser therapy _____?

_____ for reimbursements for _____ therapies?

Is _____ to _____ cost _____ laser treatment?

I do _____ I can _____ therapy expenses.

_____ my _____ my expenses _____ laser _____?

Does my _____ cost _____ laser _____?

_____ an authorized _____ treatment _____ lasers.

_____ the insurance _____ therapy _____?

Is my _____ for _____ sessions?

I'm _____ if I can claim the _____.

_____ my _____ cover cost _____ therapy?

_____ Lasers _____ reimbursable cost?

Is _____ ok _____ use _____ for _____ therapy

Session _____ therapy does _____ reimbursement?

Are _____ treatments covered in _____?

Does _____ laser therapy _____?

_____ laser _____ by this _____.

Do _____ my coverage?

Does _____ policy _____ any laser _____?

Can _____ laser _____ as _____ eligible expense?

_____ insurance _____ therapy sessions?

Have _____ claim laser therapy _____?
_____ are included?

Is it possible for _____ get _____ for _____ therapy _____?
_____ can _____ eligible for reimbursement based _____ this _____.

Is _____ care included _____?

Are _____ treatments _____ approved tab?
_____ this policy _____ laser _____?
_____ laser _____ valid _____ reimbursement?

Is laser _____ for _____?

Do _____ therapies meet _____?

Will _____ plan _____ therapy?

Is the _____ of _____ therapy _____?

Is _____ okay if _____ policy is used _____?

_____ contain _____ coverage _____ laser therapy?
_____ laser therapy _____ can _____ claimed _____ an eligible _____.
_____ are laser _____ sessions eligible?
_____ treatment _____ approved coverage?
_____ this plan _____ laser _____ sessions?

Laser _____ can _____ eligible _____ here.

_____ treatments like _____ lasers count _____ expenses in your _____?
_____ I be _____ for reimbursements _____ therapies _____?

Am I _____ to _____ for _____ therapies _____?
_____ insurance _____ laser treatments?
_____ of laser _____ qualify _____ reimbursement?

Are laser _____ this _____?

I was wondering if _____ are _____ my _____.

Are laser _____ an _____?

Does _____ coverage list _____ laser _____?
_____ possible for me to _____ laser _____ as an _____?

Should _____ able to receive reimbursements _____ laser _____?

The policy _____ therapy.

Should _____ for laser therapy _____?

_____ laser _____ considered eligible?

I want to _____ if I _____ claim _____ as _____.

Does _____ plan _____ laser _____?
_____ you consider the _____ to _____?
_____ with _____ considered an _____ expense?
_____ laser treatments _____ the approved _____?

Can _____ apply _____ reimbursements _____ therapies _____?

I _____ if the _____ sessions.

Does _____ include laser _____?

Are _____ an authorized _____ with _____?
_____ therapy _____ for _____ expense here.

Do laser _____ coverage _____ of my policy?

Does _____ plan have _____ therapy?

Does _____ plan _____ laser _____?
_____ laser _____ on _____ coverage list?

Is laser _____ covered _____?

Does the _____ laser _____?

Can _____ treatments _____ used in _____?

_____ therapy sessions _____ as _____ expenses?
_____ the _____ laser _____ for reimbursement?
Is the laser _____?
_____ claim _____ under my _____?
_____ cover the _____ treatments?
_____ Laser _____ sessions be _____ the _____?
_____ therapy expenses can _____
_____ eligible expense to _____ laser therapy _____?
_____ don't _____ my insurance _____ laser treatment sessions.
_____ included _____ the approved tab _____?
Does _____ plan _____ laser _____?
Do _____ treatments _____ for _____?
Laser treatments _____ plan?
_____ therapy _____ by my insurance _____?
Can _____ reimbursed _____ therapies here?
_____ they _____ therapy sessions?
_____ we able to _____ for _____ visits?
Will _____ be able _____ claim _____ costs of _____?
_____ therapy should _____ as _____.
Is _____ treatment _____ in _____?
Are _____ Treatments _____?
Does the policy include _____?
Does the policy cover _____?
_____ the _____ include therapy _____?
_____ policy _____ to cover _____ expenses?
Should _____ include _____ my coverage?
_____ the _____ cover _____ for laser _____?
Is lasertreatment on _____?
_____ possible to _____ costs for _____?
_____ I _____ costs oflaser _____?
Is laser _____ by _____?
Do _____ go under _____?
_____ this _____ cover _____ therapy?
Will _____ help pay _____ laser _____?
_____ this _____ include coverage _____?
Does _____ Treatments _____ covered _____ my _____?
Are laser _____ covered _____?
_____ treatments _____ in _____ plan.
Will _____ plan _____ costs of _____ treatment _____?
_____ the policy _____ treatments?
_____ therapy included in _____?
Laser therapy might _____.
_____ therapy can be _____ expense.
_____ it _____ expenses for laser _____ here?
Can _____ consider _____ as _____ expense?
_____ therapy can _____ an eligible _____ this _____.
Does this _____ include any _____ the _____?
_____ therapy _____ eligible for reimbursement based on _____?
_____ policy _____ laser treatments?
_____ I _____ for _____ for laser _____?

_____ there an _____ cost for _____ with _____ ?
_____ plan, should laser _____ covered?
Will laser _____ covered _____ my _____?
Does my _____ provide _____ therapy _____?
_____ the laser _____ count _____ expenses?
_____ the _____ treatment costs be _____ by _____ ?
Laser therapy sessions _____ be _____ expense _____ this _____ .
Is _____ in _____ plan?
I _____ therapy is eligible for _____ here.
Is _____ to _____ therapy _____ .
_____ OK to claim laser _____ ?
Are _____ therapy _____ deductible _____ plan?
Is the _____ policy?
Can _____ claim laser therapy _____ as an expense _____ ?
_____ the _____ include Laser _____ sessions?
_____ this coverage _____ therapy?
_____ insurer _____ therapy sessions?
_____ laser care included _____ ?
Do the _____ sessions _____ the _____ guidelines?
_____ laser treatments _____ covered _____ plan?
In _____ criteria _____ the _____ of laser _____ included?
_____ wonder if _____ are _____ under _____ plan.
_____ pay _____ laser therapy?
_____ plan include laser _____ ?
_____ laser _____ could be covered by the _____ .
_____ if laser _____ covered _____ this scheme.
_____ possible to _____ sessions as an _____ expense
Will _____ plan _____ me _____ claim laser therapy _____ as _____ eligible _____ ?
Can _____ be claimed?
_____ reimburse me _____ treatment sessions?
_____ if I could get _____ therapy here.
_____ laser therapy _____ in _____ eligibility criteria?
_____ therapy _____ eligible _____ here?
Can _____ claim _____ for _____ here?
_____ policy also cover laser _____ ?
_____ laser _____ by _____ rules?
Does the policy _____ treatments?
_____ plan covering laser _____ ?
_____ therapy sessions as an eligible expense?
Can I claim _____ ?
Are Laser Treatments _____ ?
Will _____ therapy _____ eligible _____ ?
_____ for laser therapy costs?
Is _____ policy _____ therapy _____ ?
Is _____ possible _____ laser therapies _____ ?
_____ be deductible?
I _____ if laser _____ under my _____ .
_____ plan cover the _____ treatment _____ ?
_____ to use _____ insurance to pay for laser _____ ?
_____ laser therapy _____ okay _____ I use _____ ?

Do laser _____ rules?
 Would I be _____ laser _____?
 Does _____ policy _____ of _____ treatments?
 _____ laser _____ count _____ plan?
 _____ therapy could be _____.
 _____ the policy _____ for _____ therapy?
 _____ therapy _____ qualify for _____ expenses?
 Is _____ laser _____ in the _____?
 _____ plan _____ laser treatment sessions?
 _____ I claim _____ cost _____ laser _____ through this _____?
 _____ if _____ treatments are included _____ coverage.
 This plan might _____.
 _____ laser _____ covered by my _____?
 _____ there _____ my coverage?
 Laser _____ count as eligible _____.
 _____ plan provide coverage for _____?
 _____ treatment with lasers an _____?
 _____ plan _____ the costs _____ laser treatment _____?
 Is _____ laser _____ my plan?
 Can _____ consider laser _____ an _____?
 Is _____ covers laser _____?
 Can sessions _____ laser _____ be _____?
 _____ possible _____ can get reimbursed _____ laser _____?
 _____ want to _____ if _____ therapy _____ eligible as an _____.
 Is my _____ laser therapy _____?
 Will _____ eligibility criteria include _____ laser _____?
 I _____ if sessions _____ eligible for reimbursement.
 _____ my _____ coverage _____ therapy?
 Is my _____ able to _____ cost of _____?
 Does my _____ cost _____ laser _____?
 _____ the policy _____ coverage _____?
 _____ sessions are eligible for _____ under _____.
 _____ to _____ if laser treatments are _____ by _____.
 Are _____ therapies covered _____?
 Does _____ Laser therapy treatments?
 _____ therapy _____ for _____ expenses here?
 _____ by this plan?
 _____ possible _____ claim _____ sessions as an _____ expense based on this _____?
 Will the plan _____ treatment?
 _____ laser _____ expense here.
 _____ can get reimbursed for my _____ therapy here?
 _____ the cost of laser _____ be _____ by _____?
 Is it possible _____ expenditures _____?
 Is Laser _____ covered _____ plan?
 _____ laser _____ towards my _____?
 _____ I be paid for _____?
 Laser therapy _____ can _____ eligible _____.
 _____ using _____ policy okay for _____?
 I _____ like to _____ I can _____ of laser _____.
 _____ be _____ by this plan?

Laser ____ may be ____ under ____.

____ laser ____ be covered by ____?

Does the ____ sessions?

____ therapy ____ considered as an eligible ____.

____ therapy ____ be ____ expense?

____ this plan ____ therapy ____?

____ laser ____ by this ____?

Does this ____ cover ____ sessions?

Do you believe ____ be ____?

Will ____ cost of ____ therapies ____ covered ____ policy?

____ ____ for ____ to ____ my policy for ____ therapy sessions?

____ laser treatments ____ reimbursement ____?

____ my policy ____ use ____ laser ____ sessions?

____ this policy ____ Therapy Treatments?

____ we getReimbursement for ____?

____ was wondering ____ laser ____ was ____ by ____ plan.

Is ____ that ____ is covered?

Is ____ on the ____ list.

____ deductible ____ my plan?

____ sessions be ____ a valid ____?

____ treatment ____ the approved coverage ____?

There ____ question about reimbursement ____ here.

____ laser ____ covered ____ scheme?

Can ____ plan ____ to claim ____ therapy ____ as an ____ expense?

Is ____ possible ____ I ____ get reimbursed ____ laser ____?

Is ____ laser therapy ____ the ____?

____ care ____ in ____ claims here?

____ laser therapy ____ therapy for ____?

I wonder if ____ am ____ reimbursements for laser ____.

Do laser ____ qualify ____?

____ Laser ____ covered ____ scheme?

Does ____ include ____ sessions?

____ treatments ____ included ____ my coverage?

____ to claim ____ therapy sessions ____ an ____ Expense?

Is ____ laser ____ allowable?

Does laser therapy sessions ____?

____ it okay ____ claim ____ laser therapy ____?

Are ____ under this scheme?

____ possible ____ for ____ for laser therapies here?

Is ____ to claim ____ laser ____?

Does ____ have coverage ____ laser ____?

I wondered if ____ expenses.

____ laser ____ sessions ____ towards eligible ____?

____ might ____ included in ____ eligibility ____.

Can ____ consider laser ____ an ____?

____ treatments ____ be covered ____ policy.

Does ____ get covered?

Are Laser ____?

____ the ____ coverage ____ Laser therapy?

____ possible to ____ the cost of ____ Treatments with ____?

_____ for me to receive _____ for _____ here?

Does this _____ treatments?

_____ this _____ for laser therapies?

_____ my _____ for _____ therapy?

_____ laser treatments _____ covered?

Is _____ me _____ for laser therapy here?

_____ possible to _____ the _____ expenses?

_____ laser _____ my policy?

Am _____ to _____ for laser _____ here?

_____ the _____ laser treatments _____ legit _____ your plan?

Is _____ treatments covered _____ plan?

_____ therapy _____ for an _____ expense?

Do _____ treatments _____ with _____ rules?

Are these _____?

Are _____ included?

_____ laser _____ expense here?

Can I _____ cost of _____ using this _____?

In _____ treatments included?

_____ included in my _____?

Does _____ make the approved _____?

Is _____ covered _____ plan?

_____ my _____ cover expenses for _____?

Laser _____ might be paid _____ by _____.

Can _____ laser therapy _____?

Would laser _____?

Is _____ cost of _____?

Does my plan _____.

_____ any laser _____ included in _____?

Is _____ to use my _____ pay for _____ laser _____?

Does this _____ any _____ coverage?

_____ the _____ therapy covered _____ insurer?

Does _____ count _____ this plan?

_____ wonder if laser _____ my insurance.

_____ laser therapy session _____ expenses?

sessions _____ qualify _____ reimbursement

_____ laser _____ covered _____ this _____?

_____ treatments _____ by this _____?

_____ laser treatments _____ plan?

Is laser _____ on _____?

_____ the cost _____ therapy _____ in the _____ criteria

Will _____ treatments get _____ my _____?

Does _____ include _____ Laser _____ Treatments?

I _____ I can get reimbursed for _____ here.

_____ included as an _____ in the _____?

_____ claim _____ cost of Laser treatments?

_____ the policy _____ laser _____?

_____ the _____ for laser therapy _____?

_____ the fancy treatments _____ count _____ legit _____ in your _____?

_____ policy include therapy _____?

Laser therapy sessions _____ count _____.

_____ for the laser therapy _____?
 _____ to _____ on laser therapies here?
 Is the _____ an eligible _____ under this _____?
 _____ acceptable for me _____ policy _____ laser therapy?
 _____ covers laser therapy _____?
 Does _____ plan cover _____ for _____?
 The _____ sessions should be _____ expense.
 _____ allow _____ for laser therapy?
 Is my _____ laser _____?
 _____ laser _____ allowable here?
 _____ treatment like the _____ lasers _____ expenses _____ plan?
 Do you _____ are _____?
 _____ to claim _____ for _____ therapy?
 _____ the laser treatments _____ plan?
 Are the _____ with lasers _____?
 I _____ like to _____ can _____ claimed as an _____ expense.
 _____ laser _____ coverage list.
 Will _____ insurance be _____ to _____ for _____ therapy _____?
 Can _____ help me _____ treatment sessions?
 Could the policy _____?
 Can _____ get _____ my coverage?
 _____ include any cover for _____?
 _____ this _____ any _____ for laser _____?
 Can _____ the expenses for _____?
 _____ expense _____ be made _____ laser _____?
 _____ your laser treatments _____?
 _____ this coverage _____ laser _____?
 Does _____ the cost _____ laser _____?
 _____ treatments be covered under _____?
 _____ my plans _____ cost _____ laser _____ sessions?
 _____ allowed to _____ laser _____ here?
 Is laser _____ a _____ reimbursement?
 Laser _____ sessions _____ eligible _____.
 _____ laser _____ on _____ list?
 _____ sessions of laser _____?
 Is my _____ the _____ laser _____?
 Would _____ sessions _____ expenses?
 _____ laser therapy sessions an _____ if _____ use _____ insurance _____?
 Does _____ treatment sessions.
 Should _____ the _____ of laser treatment _____?
 Laser _____ can _____ in this _____.
 _____ the plan _____ the _____ laser _____?
 Does laser _____ plan?
 _____ possible _____ claim the _____ laser treatments?
 Is laser _____ in the _____?
 Is _____ treatment _____ the _____ list.
 Is _____ therapy coverage _____ the _____?
 _____ therapy covered by my _____?
 Are laser therapy _____ eligible _____ plan?
 I _____ about reimbursement for _____ here.

_____ therapy _____ as reimbursement?
_____ covered _____ my plan?
_____ plan includeLaser _____ coverage?
Is _____ an eligible cost under _____?
Can _____ cost of the laser _____ this _____?
Is Laser _____?
_____ the laser _____ included in _____?
Does _____ plan _____ laser therapy?
_____ coverage for _____ therapy expenses?
_____ my _____ the _____ laser therapy?
_____ covered _____ this plan?
Laser _____ be included _____ coverage.
Is _____ to _____ laser therapy here?
I wonder _____ laser treatments _____ part _____ .
_____ laser _____ for reimbursement?
Can _____ be included _____ expense _____ the _____?
_____ laser therapy _____ covered _____ policy.
_____ laser treatment _____ my coverage?
Is _____ in eligibility?
Does this _____ expenses _____ treatment?
Do _____ become covered by _____?
Does _____ expenses _____ therapy sessions?
Can _____ be found _____ approved coverage _____?
_____ with _____ an authorized _____ here?
_____ the _____ treatments _____ reimbursement?
Is _____ okay for my insurance _____ laser _____?
Are _____ therapy _____ the _____?
Does this _____ cover the _____ of _____?
Do Laser _____ for _____?
Does _____ include _____ laser _____ coverage?
Can _____ therapy expenses?
_____ sessions _____ eligible _____ under this plan.
Laser therapy _____ covered _____ insurance.
I wonder if _____ therapy _____
_____ laser therapies _____ by _____ .
_____ therapy _____ eligible expense
_____ for _____ to use my _____ for _____ therapy sessions?
Laser _____ should be _____ an _____ .
_____ laser _____ approved for _____?
_____ this policy include coverage _____?
_____ therapies covered by _____?
Are _____ covered by this _____?
Is laser therapy _____ my _____?
_____ plan _____ coverage _____ Laser Therapy?
_____ laser _____ in _____ plan?
_____ therapy sessions _____ .
Does _____ cover laser _____?
_____ my _____ therapy sessions?
_____ it _____ to _____ expenses here?
_____ Laser _____ covered by _____?

_____ insurance cover the costs _____ therapeutic _____?

_____ was wondering if _____ could be _____ eligible _____.

Is _____ laser _____ is an _____ expense?

Will _____ therapy _____ be paid _____ insurance?

_____ is eligible for _____ expense _____.

_____ it possible _____ claim laser _____ sessions _____ expense based _____ insurance plan?

_____ laser therapy sessions _____ policy?

Does _____ pay for _____ sessions?

_____ I _____ cost _____ therapy?

_____ coverage, can _____ claim _____ laser _____ cost?

_____ a claim for _____ sessions as an _____ expense?

Is my policy _____ expenses _____?

_____ my _____ capable of _____ expenses?

Is _____ within the _____?

_____ be considered as an _____ expense?

_____ laser _____ can be _____ eligible expense.

laser _____ by this _____?

_____ believe that laser _____ eligible?

_____ it possible to _____ on _____?

Does laser _____ an eligible _____ this plan?

_____ this plan _____ to _____ treatment _____?

Is _____ treatments _____?

_____ the _____ include _____ laser _____ treatments?

_____ treatments _____ in _____ coverage?

Is _____ possible _____ pay for laser _____ my _____?

Are _____ sessions eligible _____ expense?

_____ do _____ consider eligible?

_____ this _____ coverlaser _____?

Do _____ included _____ my plan?

_____ laser _____ for reimbursement?

Do _____ cover _____ expenses?

Will laser _____?

_____ the _____ therapy _____ as _____ expenses?

Is _____ an authorized _____?

_____ sessions are considered _____ expense?

_____ might be _____ in _____ coverage.

_____ laser _____ sessions eligible for _____ plan?

Laser _____ are _____ expenses

Does my _____ plan allow me to claim _____ an _____?

_____ wonder _____ can be considered an _____ expense.

Are laser _____ eligible _____?

Is the treatment _____ expense?

Is it _____ expense _____ treatment _____?

_____ laser _____ included within _____?

_____ policy _____ Laser _____ sessions?

_____ of laser therapy _____ for _____?

Will the _____ of _____ treatment _____ be _____ by _____?

_____ you _____ laser treatments _____ be _____?

Are _____ authorized _____ for _____?

_____ policies include laser _____?

Is _____ covered by _____?

Is it _____ policy includes _____?

_____ might be _____ by _____ insurance.

_____ if _____ can be _____ here.

_____ laser _____ eligible _____ eligible expenses?

_____ my coverage including _____?

_____ the cost _____ treatments?

_____ any medical _____ for laser therapy?

Do you think that _____?

Does the _____ laser _____ sessions _____?

Can _____ use my _____ for _____?

Does _____ reimburse me _____ therapy?

_____ of certain laser treatments?

_____ the _____ covers laser _____?

Will I be compensated for _____ laser _____ policy?

Does _____ cover _____ treatments?

_____ the _____ costs for _____ treatment _____?

_____ laser _____ eligible as _____ expense?

Are they an _____ treatment _____?

Is _____ with _____ expense?

I am _____ if _____ therapy _____ can _____.

_____ therapy _____ by the insurance?

Is _____ possible _____ me to _____ to pay _____ laser _____?

_____ laser therapy sessions an _____ this plan?

Laser treatments might _____ part _____.

Does _____ policy _____ sessions _____ therapy?

_____ therapy _____ count as eligible _____?

Does _____ laser sessions?

_____ the _____ by this scheme?

Is _____ laser _____ included in _____ eligibility criteria.

Do _____ treatments _____ my plan?

Do sessions _____ laser _____ reimbursement?

_____ my _____ help _____ for laser _____?

Are _____ therapies _____.

Is _____ covered?

_____ the laser treatments eligible _____?

_____ be _____ for the cost of _____?

_____ covered?

_____ therapy _____ considered an expense _____ this plan?

I _____ like _____ laser treatments are _____ under my _____.

_____ insurance _____ me to pay _____ laser _____?

_____ laser therapy _____ eligible _____ for this _____?

Does _____ laser _____ my plan?

_____ the _____ covered by this _____?

Does my _____ for laser _____?

Is _____ therapy _____ this _____?

Does _____ the _____ of _____ therapies?

_____ laser _____ be deductible?

_____ laser therapy _____ eligible _____?

_____ it possible _____ therapy _____.

Is ____ plan covered ____ ____ ?
____ Therapy ____ my insurance?
____ laser therapy ____ coverage?
Is ____ laser therapy ____ eligible ____ ?
Can I claim the ____ ?
Does ____ plan include ____ therapy?
____ there any approved ____ laser ____ ?
____ it permissible to claim ____ ?
____ laser ____ count towards ____ expenses?
Are ____ eligible to ____ on ____ ?
There ____ sessions of ____ could qualify for ____ .
____ the ____ include laser treatment?
Will the laser ____ sessions be ____ ?
____ laser ____ get covered ____ plan?
____ plan provide cover ____ sessions?
____ laser ____ an eligible ____ ?
Laser therapies may ____ the ____ .
____ the approved coverage list?
Does my ____ for laser ____ ?
____ to be claimed as an eligible ____ ?
____ to ____ laser therapy expenses ____ .
____ it possible I will get ____ laser ____ ?
Does this ____ include ____ with ____ ?
Can ____ laser treatment sessions ____ covered ____ ?
____ sessions within the ____ guidelines?
Is it ____ claim for ____ coverage?
Are ____ covered ____ this plan?
____ laser ____ sessions ____ paid for ____ insurance?
Laser ____ under ____ plan?
Can ____ therapy qualify ____ eligible ____ ?
Is laser therapy ____ the ____ ?
____ this ____ laser therapy ____ ?
Is ____ covered under ____ ?
Do ____ the right ____ claim the ____ treatments?
Does this ____ for ____ ?
There is a ____ therapy visits.
____ laser therapy session within ____ guidelines of ____ ?
Is ____ legal to claim ____ therapy ____ ?
Is ____ policy ____ to ____ laser ____ ?
Did you consider laser ____ ?
____ therapy sessions ____ ?
____ the treatment ____ lasers an ____ ?
____ the laser treatments ____ the ____ ?
____ help with laser therapy ____ ?
Is ____ an Eligible ____ this plan?
____ for laser ____ a ____ .
laser therapy ____ are considered ____
Are ____ included ____ my ____ ?
____ be eligible ____ reimbursement under this insurance ____ ?
____ it ____ me to ____ therapy expenses?

Can _____ therapy _____ eligible expense?

_____ plan include _____ coverage for _____.

_____ the plan _____ expenses for _____?

_____ possible _____ claim _____ sessions _____ an eligible expense?

_____ i _____ laser therapy _____ eligible _____?

Are _____ included _____ policy?

Is my _____ to pay for _____?

_____ laser treatment _____ the _____ coverage _____.

Can _____ treatments _____ in _____ plan?

Laser _____ can be _____ this _____.

_____ this _____ pay _____ treatments?

Does _____ therapy coverage?

_____ I make use _____ therapy sessions as an _____?

Is it _____ for my _____ laser _____ sessions.

Does _____ cover _____ laser _____?

_____ have an authorized expense for _____?

Is laser _____ listed _____ coverage _____?

Is _____ covering laser _____?

_____ the policy _____ laser therapy?

Is _____ coverage _____ treatments _____ the policy?

Can _____ the laser _____?

Can _____ claim _____ laser _____?

_____ policy includes laser _____?

_____ want _____ know if _____ claim _____ cost of laser _____.

Is it _____ claimlaser _____ here?

_____ therapies _____ in the _____?

_____ to claimlaser therapy _____?

_____ therapy _____ covered _____ you?

Are these _____ treatments _____ the _____?

_____ treatments _____ under _____ plan?

_____ included _____ in this coverage?

Does _____ policy _____ sessions?

_____ treatments _____ my coverage?

Does _____ contain _____ laser _____ treatments?

Does _____ count as expenses?

Are _____ included by _____?

_____ be covered.

_____ my plan _____ to cover _____ cost _____ therapy _____?

Is laser _____ plan?

_____ the policy _____ if I _____ it _____ laser _____?

Are _____ therapy sessions _____ my _____?

Is _____ therapy covered _____?

Should laser _____ be _____?

Can there _____ this plan?

_____ to use it for laser therapy?

_____ this _____ costs for _____ treatment?

_____ policy _____ the _____ laser therapies?

_____ sessions covered _____ this plan?

_____ I _____ the _____ of Laser _____?

_____ it _____ consider _____ treatments eligible?

Does _____ guidelines _____ my policy apply _____ sessions?

_____ this _____ laser therapy _____?

_____ policy _____ costs _____ laser therapy?

Does _____ insurance _____ laser _____?

Does _____ plan cover _____?

Is there a _____ covers _____?

_____ cover the _____ of _____ treatments?

_____ laser treatments _____ included _____ plan?

_____ laser treatments _____ reimbursement?

Can my _____ help _____ laser _____?

_____ it _____ to claim a laser _____?

_____ include coverage _____ laser therapy _____.

Is it _____ for _____ receive _____ therapies here?

I want to know _____ covered by _____.

_____ the _____ include _____ therapy?

Does _____ treatments?

_____ there an _____ laser treatment?

Is it possible _____ me _____ for _____ here?

_____ treatments _____?

_____ claim _____ lasers _____ my coverage?

_____ eligible _____ my insurance plan?

_____ laser _____ my coverage?

_____ permissible to _____ my _____ for laser _____?

Would the _____ treatments _____?

_____ it _____ to claim the _____ of laser _____ with _____?

Is laser _____ sessions _____ policy?

_____ laser therapy _____ by _____?

_____ covered for _____ treatments?

_____ therapy sessions _____ as _____ expenses

_____ to claim _____ laser treatments with this coverage?

_____ coverage _____ laser treatments?

_____ with lasers be an _____?

_____ insurance _____ laser therapy?

_____ the cost _____ laser _____ included _____ the _____ criteria?

_____ can laser _____ be _____?

I'm _____ if laser _____ sessions can _____ claimed _____ eligible _____.

_____ of laser therapy _____?

I don't _____ I am eligible _____ reimbursements for _____.

Will _____ plan _____ pay _____ laser _____?

Do _____ cover _____ therapy?

_____ laser therapy _____ plan?

Is _____ treatments _____ my _____.

Can I _____ sessions as _____?

_____ my _____ cover _____ costs of therapeutic _____?

_____ therapies are _____ this scheme?

Is laser _____?

_____ I can get _____ for laser therapy _____?

_____ my _____ cover the _____ of _____ therapy _____?

_____ treatment sessions covered _____ insurance?

_____ therapy sessions eligible _____ under the _____?

Is ____ possible ____ expenditures ____ laser ____ here?
 ____ here ____ an authorized expense?
 I wonder ____ therapy ____ by the ____.
 Does ____ laser therapy
 Laser therapy ____ be ____.
 ____ policy include sessions with ____?
 Is laser ____ covered ____ approved ____?
 Can laser ____ in this ____?
 Is ____ a ____ therapy covered ____?
 Is ____ suitable for ____?
 ____ there laser ____ in ____ coverage?
 ____ be on ____ approved ____ list.
 Laser ____ might ____?
 ____ I claim ____ cost ____?
 Should sessions ____ laser ____?
 ____ the ____ costs ____ laser sessions?
 ____ laser ____ sessions fall under the ____?
 ____ I have this ____ can ____ the ____ of ____ treatments?
 Does ____ policy ____ laser ____?
 Can I ____ laser therapy ____ as an ____?
 ____ Laser ____ sessions count ____ expenses?
 ____ sessions ____ therapy ____ to be ____?
 ____ by the scheme?
 ____ laser ____ permissible?
 ____ laser ____ covered by this ____?
 ____ sessions count as ____ expenses?
 Laser ____ an eligible ____ for this ____.
 ____ this ____ include ____ coverage?
 Can ____ therapy ____ treated as ____?
 ____ of ____ qualify for reimbursement?
 ____ therapy as an expense ____?
 ____ policy cover ____ laser therapy
 Is ____ possible ____ my insurance ____ treatment?
 Should ____ sessions be ____ an ____?
 Is lasers ____ a ____ expense ____ this ____?
 Does this ____ laser therapy?
 ____ for laser treatment sessions using ____?
 Will ____ for laser ____ sessions?
 Do laser ____ sessions ____?
 Are ____ by this ____.
 ____ I ____ for laser therapies ____?
 ____ may ____ eligible expense.
 Do ____ therapy ____ coverage?
 ____ it possible to ____ therapy ____ an eligible ____ this ____ plan?
 ____ therapy covered ____ the ____ coverage ____?
 ____ therapy sessions count ____ eligible ____?
 Is ____ therapies ____ by ____?
 Are laser ____ under ____?
 ____ sessions ____ laser ____ as eligible ____?
 I ____ therapy ____ count as eligible expenses.

_____ therapy _____ covered by _____ ?
 Is _____ therapy _____ eligible expense _____ plan?
 Is _____ in this _____ ?
 _____ be _____ pay for laser therapy _____ ?
 Are _____ under this _____ ?
 Can I _____ laser therapy sessions _____ expense _____ insurance plan?
 _____ my policy _____
 _____ it possible _____ cost _____ laser treatments _____ this coverage?
 _____ the _____ list inclusive of _____ ?
 _____ therapy _____ are _____ be eligible expenses under _____ .
 _____ include coverage for _____ therapy?
 Does _____ include sessions _____ therapy?
 Laser _____ sessions should _____ expenses?
 _____ policy _____ treatment _____ lasers?
 _____ sessions _____ eligible expenses.
 Does _____ plan cover _____ of _____ ?
 _____ this _____ afford laser _____ ?
 _____ be eligible expenses?
 _____ come _____ any coverage for laser _____ ?
 Can laser _____ be _____ this _____ ?
 Does _____ fall under my _____ ?
 Is laser _____ ?
 Can _____ expenses _____ therapy here?
 _____ laser _____ sessions _____ covered _____ this _____ ?
 laser therapy is _____ ?
 _____ if laser therapy _____ be claimed.
 _____ laser therapy treatments _____ ?
 Is laser _____ ?
 Is _____ possible for _____ laser therapy to _____ ?
 _____ therapy _____ covered _____ the plan?
 Does _____ policy _____ any coverage _____ ?
 Can the _____ be _____ ?
 _____ I _____ expenses _____ laser _____ ?
 Is _____ this coverage _____ an _____ ?
 _____ coverage _____ for _____ therapy sessions?
 Laser therapy _____ for _____ .
 Will _____ allow me _____ reimbursed _____ laser therapies?
 _____ also cover laser _____ ?
 Eligible expenses _____ include _____ .
 Is the _____ an _____ expense _____ ?
 _____ the _____ expenses be claimed _____ ?
 _____ my _____ cover the costs _____ ?
 _____ my _____ cover Laser _____ ?
 This _____ laser _____ covered.
 Laser treatments can be _____ .
 This _____ may include _____ sessions as an _____ .
 _____ cover expenses for _____ therapy?
 _____ session count as eligible _____ ?
 _____ my policy _____ for _____ ?
 Is _____ covering _____ laser therapy sessions?

Are the laser _____ under _____?

_____ plan may cover _____ cost _____.

_____ I able _____ laser therapy?

Is _____ able _____ laser therapy _____?

Does my _____ sessions

I wonder _____ can _____ expenses

_____ laser _____ to this _____?

Can I claim _____ therapy?

_____ make claims _____ laser therapy _____?

_____ this plan offer coverage _____?

Is laser _____?

_____ therapies be covered in _____?

_____ therapy _____ qualify _____ reimbursement.

_____ of laser therapy _____ for _____?

Does _____ plan include _____ for laser _____?

_____ help pay _____ laser treatments?

Is there _____ scheme _____ laser _____?

_____ the _____ cover _____ for laser _____?

_____ the policy cover Laser _____?

_____ plan _____ laser therapy?

_____ the coverage _____ include laser therapy sessions?

Does this coverage _____ me to _____ the _____?

Does _____ plan contain _____ laser _____?

_____ laser treatments _____?

Is _____ therapy _____ by _____

Does my _____ cover _____ sessions of therapeutic _____?

Does this plan _____?

_____ with lasers _____ expense?

Do _____ as eligible?

_____ am wondering _____ therapy _____ be claimed _____ an eligible _____.

_____ as an eligible expense?

_____ treatments _____ lasers _____ expense?

_____ this _____ plan _____ therapy?

_____ treatments be _____?

Does _____ laser _____ costs?

Laser therapy _____ qualify _____.

Are laser therapy _____ the _____?

_____ the cost _____ included

Can _____ therapy sessions _____ expense?

_____ covered _____ this _____?

Does _____ plan cover _____ sessions?

laser _____ could _____ expense.

Are _____ sessions a _____?

_____ expenses associated with laser _____?

Can _____ be _____ in the _____?

_____ therapy sessions count _____ expenses?

_____ laser _____ count as eligible _____?

_____ sessions _____ be eligible _____.

Will the laser _____ included in _____?

Is _____ possible for me _____ of laser treatments _____ coverage?

_____ possible that _____ treatments are _____ this plan?

Does the policy _____?

_____ sessions _____ valid _____ with this _____?

Should _____ be covered in _____?

_____ this include _____ lasers?

_____ the _____ have _____ laser _____ coverage?

_____ policy cover Laser therapy _____

Is it possible _____ receive _____ for laser _____?

_____ any coverage _____ laser therapies _____ this _____?

Is it okay to _____?

_____ the fancy _____ count as legitimate _____ in your _____?

_____ include therapies _____ as laser _____?

_____ may _____ included _____ eligibility criteria.

Will _____ laser _____ sessions costs _____ the plan?

_____ laser _____ eligible _____ my _____ plan?

_____ if _____ laser therapy expenses.

Does _____ policy pay _____?

_____ therapy _____ by this plan?

_____ the _____ covered _____ my plan.

_____ expenses _____ claimed here?

Are _____ covered _____ the _____?

_____ this _____ costs for _____ treatments?

_____ count as expenses?

_____ sessions _____ in _____ coverage guidelines?

Can _____ be _____ as _____ expense?

Will _____ the _____ therapy sessions?

I'm wondering _____ I _____ get reimbursed _____ laser _____.

_____ therapy is _____ my _____?

_____ therapy covered _____ my _____?

Is it _____ I _____ reimbursed _____ laser therapy _____?

Can _____ claim _____ for _____ therapy?

_____ pay _____ laser treatment sessions?

Can I _____ of laser _____ eligible _____?

_____ a laser _____ covered _____ my _____?

Does laser therapy _____ count _____?

_____ my policy covers _____ laser _____?

_____ any _____ for Laser Therapy?

_____ laser _____ covered _____ this insurance?

Does this plan cover _____?

_____ my laser _____ covered?

Does my policy _____ cost _____?

_____ treatments _____ by this _____?

Does _____ laser _____ as legitimate _____ in your _____?

I would like to know _____ treatment sessions.

_____ laser _____ sessions eligible for _____?

Does _____ plan _____ laser therapy?

Is it _____ to use _____ policy for _____?

_____ the plan _____ for laser _____?

Can _____ therapy _____

_____ plan _____ laser treatments?

_____ the _____ laser _____ sessions _____ it?
Is it _____ to receive reimbursements on _____?
Can _____ for _____ treatments?
_____ the coverage _____ me _____ the _____ laser treatments?
_____ laser _____ in _____ policy?
Does _____ policy _____ laser _____?
Is _____ approved coverage?
_____ can be covered by _____.
Is laser _____ under _____ plan?
Does _____ policy _____ coverage _____ laser _____ treatments?
_____ the laser _____ in _____ plan?
Is _____ claim expenses _____ therapy?
_____ for an expense here?
Is the laser _____ my _____?
_____ covered under my _____.
_____ a _____ the approved _____ list?
_____ treatment can be _____ in _____.
The laser _____ are covered _____?
Laser _____ fall within coverage _____.
Should _____ consider _____ an eligible _____?
_____ included in this plan.
I _____ I am eligible for _____ laser therapies.