

Insurance Verification Worksheet

Service Coverage Confirmation

Ask your agent to confirm each item explicitly.

Laser hair removal covered: Yes No

Cosmetic light-based treatments covered: Yes No

Coverage applies to technicians (not only physicians): Yes No

Coverage applies to burns: Yes No

Coverage applies to pigmentation changes: Yes No

Coverage applies to adverse reactions: Yes No

Coverage applies to multiple body areas: Yes No

Supervision and provider rules

Requires supervising physician listed: Yes No (This depends on state and carrier)

Medical director must be additionally insured: Yes No

Technicians must be individually scheduled: Yes No (No is preferred, if yes, you have to update insurance every time you hire a new laser tech)

Policy exclusions

Any cosmetic procedure exclusions: Yes No

Any laser-specific exclusions: Yes No (If yes, it's a dealbreaker)

Any training-period exclusions: Yes No

Limits of liability

Per occurrence limit? (At least \$1M is ideal)

Aggregate annual limit? (At least \$3M)

Documentation confirmation

Certificate of Insurance received: Yes No

Laser rider attached: Yes No

Agent written confirmation

Attach written confirmation from your agent stating laser services are covered under this policy.