



## **Massage Therapy and Health Benefit Plans**

Personal insurance and employee health benefit plans provide varying coverage and plan options. To determine if massage therapy is included in your plan, reach out to your Human Resources Department or insurance provider directly. You should also ask for clarification on the details of your plan (coverage limits, requirements, etc.).

Some plans will have certain requirements that you must fulfill to be reimbursed for paramedical or other expenses. For example, your plan may have an annual deductible that must be paid before you are reimbursed for expenses.

A referral or prescription from your doctor is another requirement of some plans. If your plan specifies the need for a doctor's referral, you must see your doctor prior to receiving massage therapy and request a prescription or note, a copy of which must then also be kept on file by your RMT.

The process to obtain a doctor's referral may take time (waiting for an appointment, time away from work to attend the appointment) and likely will involve a fee charged by the doctor or clinic.

If the process and cost of obtaining a doctor's referral creates a barrier to accessing any of the benefits on your plan, including massage therapy care, you may be able to have this requirement removed. This not only improves your access to massage therapy care but also eases the administrative burden on physicians.

If you find massage therapy beneficial but your benefit plan does not cover it, request your insurance provider to add it to your coverage. This helps acknowledge the many physical and mental health benefits of massage therapy and encourages more comprehensive insurance coverage for you and your co-workers.

When you contact your human resources department and/or insurance company, it's helpful to include the following information:

- How massage therapy addresses any ailments or injuries you have
- How past/current treatments improved your overall work performance or well-being
- That you would like the doctor's referral requirement for massage therapy removed from your insurance plan

- How the doctor's referral requirement is affecting your ability to access massage therapy care

We have created a letter template to request the removal of the doctor referral requirement, enabling you to access and receive reimbursement for massage therapy treatments without needing a note from your doctor.

Please copy the text below and paste it into an email. Be sure to replace the placeholders with the appropriate details before sending.

Feel free to modify this letter to suit your specific circumstances and preferences. Sign the email as you normally would in a professional capacity.

If you prefer, we have also created a letter "from your RMT" which makes a similar request.

[Contact the MTAM office](#) if you have any questions or need assistance.