



Bright Connections Occupational Therapy

TIPS FOR INSURANCE REIMBURSEMENT

To facilitate insurance reimbursement for PLAY Project and home-based occupational therapy services please review the following information.

★ BEFORE THE FIRST VISIT...

- ★ Call your insurance company to ask about your out-of-network occupational therapy benefits. Use this term when participating in The PLAY Project as well. Also ask whether prior authorization is required. When you call they will ask for the following...
 - * Your membership number, your child's name and date of birth.
 - * An ICD-10/CPT/procedure code. I most commonly use code 97530 (Therapeutic Activities). You may also check 97110 (Therapeutic Procedure/Exercise) and 97112 (Neuromuscular reeducation of movement, balance, coordination, kinesthetic sense, posture, and/or proprioception for sitting and/or standing activities).
 - * A diagnosis code. If your child has been diagnosed with a specific condition you may check that with the insurance company. However, common diagnoses are often not covered, whereas diagnoses describing symptoms are covered. Be cautious of any wording or information provided to the insurance company. Appropriate information and terminology may include information such as low muscle tone, poor coordination, poor stability, frequent falls, limited strength, atypical development (fine or gross motor) decreased independence in daily activities/self-care (dressing, self-feeding, grooming, bathing, etc.) safety risks, poor nutrition, etc., as appropriate for your child.
 - * For our purposes, please inquire about the following codes as appropriate for your child.
 - ▶ PLAY Project: F84.0 (Autism), G98.8 (Other disorder of the nervous system), F93.9 (Childhood Emotional Disorder)
 - ▶ Home-Based Occupational Therapy: F84.0 (Autism), G98.8 (Other disorder of the nervous system), F93.9 (Childhood Emotional Disorder), M62.8 (Muscle Weakness), R63.3 (Feeding Difficulties)
- ★ The insurance company will provide you with information regarding your deductible, co-payment, co-insurance, out-of-pocket max, etc. For example, the insurance company may cover 75% for out-of-network occupational therapy versus 100% for in-network occupational therapy.
- ★ Also, ask whether there is a visit limit per calendar year. At times this may be a combined limit with other therapies, for example 60 visits/year combined Occupational Therapy/Speech Therapy/Physical Therapy.
- ★ Inquire about the process for submitting out-of-network claims. Can it be done online?
- ★ If your insurance company will reimburse for out-of-network occupational therapy services than a referral/prescription from your child's doctor is required. Please ask your child's doctor to write a referral for occupational therapy, that includes the covered diagnosis code.
- ★ Keep a copy (or original) of the doctor's referral for your records. Fax a copy to Bright Connections Occupational Therapy at (248) 581-8235.
- ★ Contact Bright Connections Occupational Therapy to share your findings and schedule an initial appointment!

Email:

Lauren.V@BrightConnectionsOT.com

Call:

(248) 629-0193

Visit:

www.BrightConnectionsOT.com

INSURANCE REIMBURSEMENT CHECKLIST

Determine out-of-network benefits for occupational therapy.

Notes:

Check coverage for ICD-10/CPT/Procedure Codes.

Notes:

Check coverage for Diagnosis Codes.

Notes:

Is pre-authorization required?

Notes:

What is the visit limit?

Notes:

How are out-of-network claims processed?

Notes:

Call your child's doctor and request a script for occupational therapy services, which includes the diagnosis. If you have questions regarding which diagnosis we will be using, please contact Bright Connections.