

246 West 80th Street, 3rd Floor New York, NY 10024

Determining Your Insurance Benefits for Occupational Therapy

- 1. Call the toll-free number, member services, located on your insurance card.
- 2. If there are any prompts for departments, you want eligibility/benefits. Once you reach a live network representative, ask him/her if you have "Out of Network Benefits Coverage." If the answer is "No", you are not covered.
- 3. When speaking to a representative, make sure, he/she understands that you are seeing a non-preferred provider/out of network provider who your doctor referred you to.
- 4. If the answer is "Yes":
- 5. Inquire about your general occupational therapy out-of-network benefits. (occupational therapy is a separate bucket than physical therapy coverage)
- 6. Questions you should ask:
 - a. Is there a deductible amount and what has been applied so far?
 - b. Is there a co-insurance amount and what has been applied so far?
 - c. To determine your reimbursement rate, ask the following questions: What percentage of reimbursement do I have? (60%, 80%, 90%, are all common) What is the maximum reimbursement rate based on? (Usual and Customary Rate/UCR or Medicare Rate/MNRP) ask for percentile of each. Ask when your deductible year begins. It's usually the beginning of the year, but not always.
- 7. Is there a limit to the number of sessions I am covered out of network?
- 8. Is an authorization or a referral required for occupational therapy?
- 9. Do you require any additional information besides a receipt (special form, etc) for reimbursement submission?
- 10. Finally, inquire about the mailing address to send the receipt to.
- 11. Ask for his/her name and reference number of the call for your records.