

Insurance Coverage Guide

At Learning Dynamics, we want people to understand that any insurance coverage they have is an agreement between the individual and their insurance company. As the combination of insurance companies, plans, and covered benefits are endless; Learning Dynamics does not assume responsibility for ensuring reimbursement, and clients are responsible for any amounts not covered by their insurance plan, for any reason (e.g. code, location, provider, amount).

Whether you are seeking services with us or another provider, we strongly encourage you to confirm reimbursement qualifications prior to agreeing to services, so you are fully educated on your financial benefits and obligations. We understand that this can feel like an overwhelming task. Therefore, we have created this guide to serve as a resource to assist you in the education process. While there may be more questions for you to ask regarding the specifics of your plan's benefits, we hope that you will find this form helpful as you begin the process.

Contacting your insurance company directly, and speaking with one of their representatives, is the best way to ensure that you clearly understand your coverage and financial responsibilities. The first step is to locate your insurance card. This contains information that you will need, including a phone number to call with questions regarding your benefits. This number is usually on back of card and often listed as "member services." If you do not have your physical card, the representative may be able to assist you. However, if you are not the primary policy holder (you are under parent/spouse), be prepared to provide the representative with information on the primary policy holder to locate your account (e.g. their name, date of birth, address, social security).

We hope the information below helps you gain a wealth of information from your conversation.

General Information

- Insurance plan coverage limits and amounts are often annual amounts. Not all plans start January 1st and end December 31st. The annual dates vary, based on plan/employer. Confirming your dates can help you financially plan.
- Not all diagnoses and/or types of services and/or types of clinicians are covered by every insurance plan.
 - If you are seeking assistance for a specific difficulty/diagnosis, inquire to ensure that it is covered by your plan.
 - If you are seeking psychological, neuropsychological, or psychoeducational testing, to examine the possibility you have a particular diagnosis, you will want to ask specifically about this coverage.
 - Many plans do not cover testing to identify learning disabilities, so be sure to ask if you are seeking this.
 - People seeking evaluation for the potential of BOTH learning disabilities and psychological disorders (e.g. ADHD, anxiety, depression, autism, etc.), should ask separately about how this may apply.
- CPT (Current Procedural Terminology) codes are used by insurance companies to identify the service received and the amount of reimbursement available. For some plans, coverage amounts/percentages varies between services (e.g. testing, therapy). To get accurate coverage information, verify the CPT codes associated with the service(s) you are interested in receiving. This list is NOT exhaustive.

90791	Initial Session	96101	Testing by psychologist	96119	Neuropsych testing by technician
90834 & 90837	Therapy Session	96118	Neuropsych testing by psychologist	0359T-0372T	ABA/Behavior codes
90846 & 90847	Family Session	96102	Testing by technician		
90853	Group Session				

Modifiers can inform insurance of the educational level for clinicians; including unlicensed, supervised clinicians: HO/HP

Questions to Ask Your Insurance Company Regarding Your Benefits

Do I have outpatient mental health (technical term = behavior health) coverage? Yes No

Do I need to obtain a referral from my physician or a preauthorization to utilize these benefits? Yes No

▪ If yes, pre-authorization number: _____

▪ Is there a certain number of sessions that this authorization covers? _____

▪ Can and how is this authorization renewed/extended if needed? Are there other limitations to be aware of?

Do I have "in-network" (health care providers that are part of your insurance company's plan) coverage? Yes No
 Do I have "out-of-network" (providers that do not participate in your insurance company's plan) coverage? Yes No

- If we are an "out-of-network" provider, you will have to privately pay us for the service(s). We can provide you with a "superbill" (fancy word for medical receipt) that you can submit to your insurance company for reimbursement. We strongly recommend you clarify this process and the amount you should expect to receive prior to obtaining services with our agency. We are not responsible for this process, nor do we provide assistance, as it is out of our scope of knowledge.

- What address/fax do I submit my superbill to? _____
- Is there specific information you require? _____
- Is reimbursement sent to the provider or me? _____
- How long does this process generally take? _____

Is there anything else I should be aware of? _____

Question	In-Network	Out-of-Network
Are the following CPT codes covered in my plan? (provide codes you want to check on)		
Are the following modifiers covered in my plan? (provide the modifiers you want to check on)		
What is my deductible (amount must pay before your insurance coverage begins) for individual and family?		
To date, how much I have met towards my deductible?		
Is my deductible waived for mental health? Is it combined with other medical expenses? Is my deductible met when I first hit either the individual or family?		
What dollar or percentage amount of my session fee does my plan cover? Is this amount per hour? Per day? Per procedure?		
What dollar or percentage of my session do I pay (co-pay/co-insurance)?		
What is the max. amount per session that will be reimbursed (reasonable & customary amount)?		
Do I have a limit on the number or frequency of sessions?		
What is my out-of-pocket maximum (amount I stop paying and insurance covers 100%)?		
Are there any other fees or limits to my policy?		
Are reimbursements sent to me or to the provider?		
Do the individuals providing my service need to be independently licensed to receive reimbursement if the name of both the unlicensed/registered provider and their licensed supervisor is provided on the superbill (technical term for receipt you are given by provider)?		
Other:		
Other:		

Remember to ask for reference number for your call and/or name of insurance representative & date/time of your call. In the event your coverage does not process as described, having this information can be valuable.

**Now that you understand your coverage, you can contact potential providers!
For those of you interested in working with us, we can be reached at (310) 855-3276.**

Mental Health Services Trainee Option

Mental health professionals (e.g. social workers, therapists, psychologists) have to accrue many hours of supervised clinical experience (both during and after their graduate programs) in order to obtain licensure. Many facilities, including Learning Dynamics, offer training programs that assist individuals in gaining these hours. The benefit to you as a community member is that the services offered by these individuals are typically provided at reduced rates. While your insurance coverage may or may not cover services you receive by trainees, you may consider investigating the cost of working with these professionals. Depending on your coverage, the cost of working with trainees may be a greater savings than the use of your insurance benefits.

While these clinicians are not independently licensed, at Learning Dynamics trainees have typically completed masters and even doctoral degrees (education/experience levels vary between sites, so be sure to ask). Trainees are always supervised by licensed professionals. At our agency, trainees have multiple supervisors and supervision is done in a variety of ways including direct observation of sessions. Additionally, trainees conduct research to present and discuss with their supervisors about the interventions being used in their treatment of cases. As a result, working with a trainee tends to lend itself to a vast amount of attention (ideas and individuals) given to your treatment.

If you are unsure of local training facilities in your area, consider searching the internet for mental health graduate programs in your area (e.g. clinical psychology, social work, counseling). Since supervised clinical work is a requirement of mental health graduate programs, universities often maintain lists of local agencies their students are able to use to gain these hours.

Graduate school name, program, & phone: _____

Graduate school name, program, & phone: _____

Graduate school name, program, & phone: _____

What services are you looking for/do you want to ask agencies about? (Use as a guide when calling)

- individual counseling/therapy couples/premarital counseling family counseling/therapy group therapy
 educational therapy social skills training parent education psychological testing psychoeducational testing
 neuropsychological testing ABA (Applied Behavior Analysis) Other: _____

Agency: _____ Phone: _____

Website: _____

Address: _____

Service: _____ Trainee education/cost: Bachelor _____ Masters _____ Doctorate _____

Service: _____ Trainee education/cost: Bachelor _____ Masters _____ Doctorate _____

Agency: _____ Phone: _____

Website: _____

Address: _____

Service: _____ Trainee education/cost: Bachelor _____ Masters _____ Doctorate _____

Service: _____ Trainee education/cost: Bachelor _____ Masters _____ Doctorate _____

Agency: _____ Phone: _____

Website: _____

Address: _____

Service: _____ Trainee education/cost: Bachelor _____ Masters _____ Doctorate _____

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