



# Trauma Informed Therapies

## What to ask your insurance company

Verifying your health insurance coverage can be confusing. Trauma Informed Therapies (TIT) recommends that you contact your insurance company if you are considering starting treatment with us. You should also verify benefits once a year or whenever your policy changes.

This form will help you know what to ask about coverage at TIT. **Make sure to get answers to all of the questions below.**

You can also use this form during your open enrollment period when you're reviewing your health insurance options and selecting a new plan (whether you're going through your state's exchange or your employer).

To ensure you get all the information you need from your conversation to verify benefits; we have included a phone script below. Have the information in lines 1-4 ready **before** you begin your call. If you don't know your provider's name, feel free to call us at 509-842-0067 extension 1 or stop by our front desk.

### Insurance Verification:

1. My individual therapist's name: 1. \_\_\_\_\_

2. Today's date 2. \_\_\_\_\_

3. Representative's name 3. \_\_\_\_\_

4. Customer service phone number 4. \_\_\_\_\_

5. **Phone script:** "I'm going to Trauma Informed Therapies for help with my mental health and am calling to verify my benefits. First, I'd like general information about my plan"

6. Policy effective date 6. \_\_\_\_\_

7. Office visit co-pay 7. \_\_\_\_\_

8. Deductible 8. \_\_\_\_\_

9. Out of pocket maximum (OOP max) 9. \_\_\_\_\_

10. Do my deductible, co-pays and co-insurance apply toward my OOP max? 10. \_\_\_\_\_

11. How much of my deductible have I spent this year? 11. \_\_\_\_\_

12. Do I need a referral to go to Trauma Informed Therapies? 12. \_\_\_\_\_

13. If yes, who needs to refer me? 13. \_\_\_\_\_

14. Is Trauma Informed Therapies in-network? 14. \_\_\_\_\_

**Intake/Brief Emotional-Behavioral Assessment/Individual Therapy/Group Therapy:**

**1. Tell the representative that TIT uses CPT code 90791 for diagnostic assessment.**

- A) What's my co-pay/co-insurance (circle one)? A) \_\_\_\_\_
- B) Is there a limit on the number of diagnostic assessments per year? B) Yes / No (circle one)
- C) If so, how many diagnostic assessments per year? C) \_\_\_\_\_
- D) Is authorization required for diagnostic assessments? D) Yes / No (circle one)

**2. Tell the representative that TIT uses CPT code 96127 for Brief Emotional-Behavioral Assessment.**

- E) Is there a limit on the number of units of brief emotional-behavioral assessment per year? E) Yes / No (circle one)
- F) If so, how many units of brief emotional-behavioral assessment per year? F) \_\_\_\_\_
- G) Is authorization required for brief emotional-behavioral assessment? G) \_\_\_\_\_

**3. Tell the representative that TIT uses CPT codes 90834 and 90837 for Individual Therapy.**

- H) What's my co-pay/co-insurance (circle one)? H) \_\_\_\_\_
- I) Is there a limit on the number of individual therapy sessions per year? I) Yes / No (circle one)
- J) If so, how many individual therapy sessions per year? J) \_\_\_\_\_
- K) Is authorization required for individual therapy? K) Yes / No (circle one)

**4. Tell the representative that TIT uses CPT code 90853 for Group Therapy.**

- L) What's my co-pay/co-insurance (circle one)? L) \_\_\_\_\_
- M) Is there a limit on the number of group therapy sessions per year? M) Yes / No (circle one)
- N) If so, how many group therapy sessions per year? N) \_\_\_\_\_
- O) Is authorization required for group therapy? O) Yes / No (circle one)

Notes: \_\_\_\_\_

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