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To help families understand what the financial cost will be for therapy services, we suggest families contact their insurance provider.

The following questions and information can be used to guide your call:

1. Does my child's insurance plan provide coverage for physical, occupational, and/or speech therapy services? YES / NO

Common CPT (billing) codes for treatment

speech therapy cpt code: 92507

physical therapy cpt code: 97110

occupational therapy cpt code: 97530

Common diagnosis codes for therapy

Occupational therapy (F82)

Physical Therapy (M62.81)

Speech Therapy (F80.2, F80.0)

2. Is habilitative therapy covered by my plan? YES / NO

Habilitative therapy is a term used to describe therapy that is performed to gain new skills, not recover skills lost due to an accident, injury, and/or illness.

3. Are there any exclusions for NOT covering services due to a specific diagnosis, or age? YES / NO

Explain: _____

4. Do I need to meet my deductible before insurance will begin to pay for therapy services? YES / NO

-If yes, what is the deductible for the year? _____

-How much is left before I hit the deductible? _____

-When does my deductible reset? _____

5. If the services are covered and insurance begins to pay, what is my "patient responsibility"?

co-pay amount: _____ (per visit/per day) OR co-insurance percentage: _____

6. If the services are covered, how many ST, OT, or PT visits are covered per year?

Occupational Therapy: _____ Physical Therapy: _____ Speech Therapy: _____

Are any of these visit counts combined (i.e. OT & PT)? _____

7. Once I hit my visit limit for the year, is there any way I can request more visits if therapy is still needed? _____