

Parents' Guiding Questions About Health Insurance Coverage For Therapy Services

Please contact your health insurance and review your insurance coverage using these guiding questions below to understand your coverage and rights

Call your insurance company's customer service phone number on the back of your card.
1. My child is ___age old. Does our policy cover the following therapies in network or out of network? Physical Therapy Speech Therapy ABA Occupational Therapy ☐
2. If yes, then ask:
Is a referral or pre-authorization required? When do I need to get re-authorization and ongoing referrals? How often? Who must ask for this, Watch Me Bloom or the Parent?
Which conditions are specifically excluded from coverage of above therapies?
What ICD-10 (diagnosis) codes and CPT (treatment) codes are covered for reimbursement?
How many visits are covered? Is this an annual limit or a lifetime limit?
What is my co-pay and deductible amount?
CPT Codes: OT (97530), PT (97110), Speech (92507), ABA (97153)
Are there any exclusions in my policy?
Confirm if Watch Me Bloom (Also registered as: <i>Pronto Therapy Group</i>) is in-network/out of network: <ul style="list-style-type: none">• Taxpayer ID – 27-2170447• NPI – 1811215981