

ANSWERS TO THE QUESTIONS YOUR INSURANCE COMPANY MAY ASK

- 1) I am not a preferred provider in your network.
- 2) I am licensed as a clinical psychologist in the state of California. My license number is PSY14261. My tax ID is 20-4969484. My National Provider ID is 1407010374
- 3) Cost of the evaluation is \$6400
- 4) What I will be doing as part of the evaluation:

<u>Procedure</u>	<u>Insurance code</u>	<u>Cost</u>
1 hr initial interview	CPT 90791	(\$400)
1 hr neurobehavioral status exam*	CPT 96116	(\$250)
2 additional hrs neurobehavioral status exam	CPT 96121	(\$250x2= \$500)
.5 hrs psyche/neuropsych test admin/score	CPT 96136	(\$125)
19 additional .5 hrs psyche/neuropsych test admin/score	CPT 96137	(\$125x19= \$2375)
1 hr psychological testing evaluation services	CPT 96130	(\$250)
3 additional hrs psychological testing evaluation services	CPT 96131	(\$250x3= \$750)
1 hr neuropsych testing evaluation services	CPT 96132	(\$250)
6 additional hrs neuropsych testing evaluation services	CPT 96133	(\$250x6 = \$1500)

* Codes 96116 and 96121 include patient interview, mental status exam, interpretation, and preparation of this aspect of report.

* Codes 96136 and 96137 include administration of tests in the office and scoring of tests thereafter

* Codes 96130 and 96131 include interpretation of psychological test results, clinical decision making, preparation of report, treatment planning, and meeting to discuss psychological test findings.

* Codes 96132 and 96133 include interpretation of neuropsychological test results, clinical decision making, preparation of report, treatment planning, and meeting to discuss neuropsychological test findings.

If you tell the insurance company that your child is having problems in school, they may inform you that your health insurance is not designed to help a child with academic trouble. However, children who are having trouble in school are often having trouble in other areas of life. Problems may be more evident in school because it is where your child spends the most time and the demands made there are consistent. If the insurance representative asks who you are seeking the evaluation, I encourage you describe the impact of the issues at hand more broadly than the ways in which they are evident in the school setting.

If your insurance company tells you they have to speak to the doctor (me) before authorizing testing, tell them they need to authorize a "90791" before that conversation can happen. This code (90791) refers to our initial meeting, at which I gather information from you about the problems for which you are seeking testing. It is only after this meeting takes place that I will understand the issues in enough detail to explain to the insurance company why the testing is needed.

If your insurance company tells you that your reimbursement will be contingent on the diagnosis, ask to speak to a supervisor who will (hopefully) understand that the above codes refer to a diagnostic procedure, and that what they are proposing is akin to saying they will pay for x-rays only if you have a fracture. If the diagnosis were known, there would be no reason to do this testing.

Some insurance plans may allow you to be reimbursed for my services if there is no comparable in-network provider in a certain geographical proximity to you. You might inquire with your insurance company if this is so, and determine whether they can provide for you a "board certified neuropsychologist" or, for children, a board certified neuropsychologist" in-network.

Good luck! And please feel free to call if I can clarify anything further.