



# Accessing your insurance benefits for Therapies

*This guide was created to help you navigate this process efficiently and with confidence. Having your important records, evaluations, reports, medical documents, insurance information, identification, and supporting paperwork digitally scanned, organized, and readily accessible can save valuable time and reduce stress throughout this process.*

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## **Accessing your insurance benefits for Therapies:**

Applying for speech therapy, occupational therapy (OT), physical therapy (PT), and Applied Behavior Analysis (ABA) services through your insurance company involves doing some research. If your child is under 5 years old, start by contacting your state's early intervention program (birth to 3) or preschool program (3-5) through your school district before applying for insurance-based services, as these programs may provide the assistance you are looking for. However, many individuals access therapies/services through their insurance in addition to services provided by their school districts.

### **1. Determine what services your child needs:**

- **Speech therapy:** helps individuals remediate articulation, phonological disorders, motor speech disorders, feeding issues, pragmatic language, receptive language, expressive language, voice disorders, hearing-related speech disorders, and provide instruction in augmentative and alternative communication (AAC).
- **Occupational therapy:** Helps individuals develop, recover, or maintain the skills needed for everyday life and independence. OTs work with people of all ages to enhance their ability to perform activities of daily living (ADLs), motor skills, sensory processing and executive function.

· **Physical therapy:** · Assists those with movement, balance, mobility, strength and endurance limitations.

· **Applied Behavior Analysis (ABA):** □ ABA is one of the most widely used and evidence-based therapies for autism. Individuals with other intellectual and developmental disabilities may benefit from ABA as well. ABA is often successful in reducing behavior challenges, developing social skills, improving communication, increasing independence, generalization of skills and even assisting with academics. Desired behaviors are encouraged and rewarded, which motivates individuals to repeat those behaviors.

**2. Get recommendations from other parents and from your existing medical team for therapists that they like.** A good provider will typically walk you through what is needed to get started. Therefore, getting recommendations from parents in your area on service providers they are happy with is a great first step and can save you time. The therapist may already be familiar with your insurance and do much of the work for you in getting your child approved.

**3. Call Your Insurance Provider to verify benefits and coverage:** Use the customer service number on the back of your insurance card to inquire about coverage for speech therapy, OT, PT and ABA services. Ask About Specific questions about your benefits: Is there a co-pay, deductible, or out-of-pocket maximum? Are there session limits for therapy (e.g., 20 visits per year)? Are referrals or pre-authorizations required? Are there restrictions on where services can be provided (e.g., at home, in a clinic)? Is ABA therapy specifically covered for autism spectrum disorders (ASD)? Request a Benefits Summary: Ask for written documentation of what is covered and under what conditions.

**3. Obtain a Referral or Prescription from your child's doctor:** Ensure the referral includes: Diagnosis codes (e.g., for ASD, speech delay, motor delay). Recommended therapy types (speech, OT, PT, ABA) and frequency (e.g., "3 sessions per week for 6 months").

**4. Get Evaluations or Screenings:** Your pediatrician might refer you to a specialist (e.g., developmental pediatrician, psychologist) for diagnostic assessments to justify the need for services. ABA insurance authorization often requires a diagnosis of autism spectrum disorder using standardized testing including a structured observation tool, such as the Autism Diagnostic Observation Schedule, Second Edition (ADOS-2), Childhood Autism Rating Scale, Second Edition (CARS-2) or the comparison to DSM-5 Criteria.

**5. Obtain Pre-Authorization.** Submit Required Documentation: Your insurance company may require: Doctor's referral/prescription; Diagnostic evaluation reports; Individualized treatment plan from the provider. Your provider may handle this step, but follow up with both the provider and the insurance company to ensure approval.

**6. Schedule an Initial Evaluation.** Once approved, schedule an initial evaluation with the provider. They will assess your child and create a treatment plan based on their needs. Your provider will submit the treatment plan to your insurance if required.

**7. Follow up** with your insurance company to confirm your authorization for treatment. They may inform you that this can take as little as a few days or as long as a few weeks. Ask for the authorization in writing and save you records to refer back to when needed.

Be patient when starting a new treatment. It may take time to develop a relationship with a new provider and to see benefits. If you are not seeing improvements with treatment, ask your provider when you might see progress or if there is anything that can be done differently. Parents have the right to seek other providers if the fit is not beneficial.