

Verifying your health insurance coverage can be confusing! Little Bird Psychotherapy recommends that you contact your insurance company if you are considering starting psychotherapy. It is also wise to verify benefits once a year or whenever your policy changes.

This form will help you know what to ask about coverage for services at Little Bird Psychotherapy. Insurance Verification Form

"I want to to verify my benefits for psychotherapy/counseling."

Date Re	Representative's Name First		Last Initial		
Insurance Company			Cust	omer service p	hone #
,		Group Number Policy effective date		Subscriber	DOB
Deductible OOPmax (out		f pocket maximum)			
Do my deductible, co-pays & o	co-insurance app	ly toward my C	OOP max?		
How much of my deductible h	have I spent this y	ear?			
Is Little Bird Psychotherapy in-	I /		Yes		No
Do I need a referral to go to LBP? (circle one)			Yes		No
If yes, who needs to refer me?					
Intake (Tell the representative that I What's my co-pay / co-insuran		0)	
Is authorization required for diagnostic assessments?			Yes		No
Are intake evaluation services delivered via Telehealth covered?			Yes		No
Is there a limit on the number of diagnostic assessments per year?			Yes		No
If so, how many diagnostic ass	essments are cov	ered per year?			

Individual Therapy (Tell the representative that LBP uses CPT codes 90834 and 90837 for these services.)

What's my co-pay / co-insurance? \$		
Is authorization required for individual therapy?	Yes	No
Are individual therapy sessions delivered via Telehealth covered	l? Yes	No
Is there a limit on the number of sessions per year?	Yes	No
If so, how many individual therapy sessions per year?		