

Payment Policy

The therapists at Plano Therapeutic Services are committed to providing high quality therapy services for those we serve. We want to keep the focus on helping our clients. In order to keep our costs down, we do not file insurance.

We are an Out of Network Provider. Our clients pay us directly, and then file their own insurance. We will provide you with the necessary codes and paperwork to file with your insurance company for reimbursement. We will work with you to help insure that your child receives the services that they need.

Since you are responsible for your treatment charges, we advise you to check your benefits with your insurance company before starting therapy.

These are some questions that you should ask:

- Does my plan provide coverage for Occupational Therapy services?
- Are evaluations covered?
- How many sessions are allowed under my plan? Are there limits on how long a treatment session may be? (e.g. 30 minutes versus 45)
- What out-of network coverage do I have? Can I appeal for an out-of-network exemption?
- What are the deductibles and co-pays for out of network services?
- Do I need prior authorization or a referral for Occupational Therapy services?

You should note the name of the representative who assisted you as well as the date of your conversation for future reference.

Your insurance policy is an agreement between you (or your employer) and your insurance company. The actual coverage determinations are made after the evaluation and diagnosis is reviewed by your insurance company, regardless of what a representative may have originally said on the phone. Insurance companies can deny payment for services even after they have authorized therapy. Though your child may need therapy, their diagnosis or treatment may not fall within your individual policy guidelines, or may not be considered "medically necessary".

In the event that you do have trouble with reimbursement, and you feel that insurance is making a mistake, we strongly encourage you to contact your Human Resources Department as well as the insurance company to express your concern. Insurance companies are much more responsive to you, as their customer, than they are to providers. You can also make a difference in coverage in the future by lobbying with your Human Resources Department.

If you do not have insurance coverage for your child's therapy, we are happy to provide therapy to you as a private client. Our priority is always to help your child. Private pay therapy is considered a medical expense for tax purposes and we will give you detailed information for your records.