**Out of Network Insurance Benefits**

Please contact your insurance company and ask them the following questions. If your insurance company would like to know my NPI number, possible diagnostic codes, or any additional information, please contact [info@DrTajaEstrada.com](mailto:info@DrTajaEstrada.com).

**Questions for Psychological Evaluations**

* Do I have Out of Network coverage?
* What are my Out of Network benefits?
* What is my deductible?
* After I meet my deductible, what percentage of the visit cost will I be reimbursed for?
* For the following CPT codes (the 5-digit numbers below): How much can I be reimbursed? Is there a limit to the number of units I can be reimbursed for? Do I have Telehealth benefits, **with location 2 and modifier GT/95**?
* **90791** - intake appointment  
  Reimbursement amount: \_\_\_\_\_\_\_\_\_  
  Maximum number of units reimbursed \_\_\_\_\_\_\_\_

Is Telehealth covered? \_\_\_\_\_\_\_\_

* **96136** and **96137** - psychological test administration and scoring codes

Reimbursement amount: \_\_\_\_\_\_\_\_\_  
Maximum number of units reimbursed \_\_\_\_\_\_\_\_

Is Telehealth covered? \_\_\_\_\_\_\_\_

* **96130** and **96131** - psychological evaluation services, including interpretation, report writing, and feedback appointment

Reimbursement amount: \_\_\_\_\_\_\_\_\_  
Maximum number of units reimbursed \_\_\_\_\_\_\_\_

Is Telehealth covered? \_\_\_\_\_\_\_\_

* **96132** and **96133** - neuropsychological evaluation services, including interpretation, report writing, and feedback appointment

Reimbursement amount: \_\_\_\_\_\_\_\_\_  
Maximum number of units reimbursed \_\_\_\_\_\_\_\_

Is Telehealth covered? \_\_\_\_\_\_\_\_

**Questions for Therapy**

* Do I have Out of Network coverage?
* What are my Out of Network benefits?
* What is my deductible?
* After I meet my deductible, what percentage of the visit cost will I be reimbursed for?
* For the following CPT codes (the 5-digit numbers below): How much can I be reimbursed? Is there a limit to the number of units I can be reimbursed for per year? Do I have Telehealth benefits, **with location 2 and modifier GT/95**?
* **90791** - intake appointment  
  Reimbursement amount: \_\_\_\_\_\_\_\_\_  
  Maximum number of units reimbursed \_\_\_\_\_\_\_\_

Is Telehealth covered? \_\_\_\_\_\_\_\_

* **90832** - individual therapy, 16-37 minutes  
  Reimbursement amount: \_\_\_\_\_\_\_\_\_  
  Maximum number of units reimbursed \_\_\_\_\_\_\_\_  
  Is Telehealth covered? \_\_\_\_\_\_\_\_
* **90834** - individual therapy, 38-52 minutes  
  Reimbursement amount: \_\_\_\_\_\_\_\_\_  
  Maximum number of units reimbursed \_\_\_\_\_\_\_\_  
  Is Telehealth covered? \_\_\_\_\_\_\_\_
* **90837** - individual therapy, 53 minutes and over  
  Reimbursement amount: \_\_\_\_\_\_\_\_\_  
  Maximum number of units reimbursed \_\_\_\_\_\_\_\_  
  Is Telehealth covered? \_\_\_\_\_\_\_\_
* **90846** - family therapy without the patient present, 50 minutes  
  Reimbursement amount: \_\_\_\_\_\_\_\_\_  
  Maximum number of units reimbursed \_\_\_\_\_\_\_\_  
  Is Telehealth covered? \_\_\_\_\_\_\_\_
* **90847** - family therapy with patient present, 50 minutes  
  Reimbursement amount: \_\_\_\_\_\_\_\_\_  
  Maximum number of units reimbursed \_\_\_\_\_\_\_\_  
  Is Telehealth covered? \_\_\_\_\_\_\_\_