



How to understand your benefits for ST and OT

QUESTIONS TO ASK WHEN CALLING INSURANCE:

1

Is The Therapy Spot, llc in network with my plan?

Information you will need:

Tax ID 83-2431648
NPI 1619446382

2

Where are the services provided?

We bill as Outpatient services

Our Address:
1216 Selby Avenue 55104

3

How are services billed?

We bill as a facility, not provider
The services provided are habilitative services (developmental)

4

What codes will the therapists use?

OT bills 97530
ST bills 92507

If you're told that either code needs prior authorization please let us know and we will obtain on your behalf

Do I need an insurance referral? What is that?

This only applies when we're out of network or your plan requires a referral in place to allow us to bill on your behalf. Without an insurance referral your insurance company will charge you the out of network rate and your responsibility will be much higher. If you need an insurance referral, please contact your primary care provider (PCP) and let them know that you need an ***insurance*** referral.

Questions? email billing@thetherapyspotmn.com

INSURANCE VOCABULARY

*What does it all
mean?*

DEDUCTIBLE

A DEDUCTIBLE IS THE AMOUNT YOU ARE RESPONSIBLE TO PAY PRIOR TO THE PLAN BEGINNING TO HELP FUND SERVICES. WHILE WORKING TOWARD YOUR DEDUCTIBLE YOUR INSURANCE COMPANY NEGOTIATES A LOWER RATE FOR MEDICAL SERVICES PROVIDED

CO-PAY

A CO-PAY IS A SET AMOUNT THAT YOU MUST PAY PER VISIT. SOME PLANS HAVE A COPAY AND NO DEDUCTIBLE, SOME HAVE A DEDUCTIBLE THAT NEEDS TO BE MET AND THEN A COPAY BEGINS AFTER THE DEDUCTIBLE IS MET.

CO-INSURANCE

CO-INSURANCE IS A PERCENTAGE OF THE NEGOTIATED REIMBURSEMENT RATE YOU MUST PAY ONCE YOUR DEDUCTIBLE IS MET. A 80/20 IS MOST TYPICAL, WITH INSURANCE PAYING 80% OF THE NEGOTIATED RATE AND PATIENT FAMILY PAYING 20% OF COSTS

OUT OF POCKET MAXIMUM: YOUR PLAN SETS A LIMIT OF WHAT YOU COULD POSSIBLY PAY OUT OF POCKET TOWARD CARE IN A YEAR