Vantage Point
Psychological Evaluations

Insurance Reimbursement Inquiry Guide

> I do not bill insurance directly. After your assessment, you receive an itemized superbill listing the amount you paid for each service, the CPT codes, the dates of service, and your diagnosis code. You can submit it to your insurance company to request reimbursement. Reimbursement is not guaranteed. Call the member services number on your insurance card and ask about out-of-network outpatient mental health benefits for psychological testing.

1. CPT codes to ask about

CPT code	Service	Covered?	Preauthorization required?
90791	Initial clinical interview	☐ Yes ☐ No	☐ Yes ☐ No
96127	Brief standardized questionnaires (per instrument)	☐ Yes ☐ No	☐ Yes ☐ No
96136	Test administration and scoring, first 30 min	☐ Yes ☐ No	☐ Yes ☐ No
96137	Test administration and scoring, each additional 30 min	☐ Yes ☐ No	☐ Yes ☐ No
96130	Evaluation services, first hour: record review, integration of results, report, and feedback	☐ Yes ☐ No	☐ Yes ☐ No
96131	Evaluation services, each additional hour	☐ Yes ☐ No	☐ Yes ☐ No
90887	Explaining results to family or others involved in your care (substance use and gambling assessments)	☐ Yes ☐ No	☐ Yes ☐ No

2. Diagnoses to ask about

Some plans cover testing only for certain diagnoses. Your diagnosis is determined by your assessment, and early in the process it may be provisional or unspecified, so ask about each one that applies to you.

Condition	Possible ICD-10-CM codes	Covered?	Preauthorization required?
ADHD	**F90.0, F90.1, F90.2, F90.9**	☐ Yes ☐ No	☐ Yes ☐ No
Autism spectrum disorder	**F84.0**	☐ Yes ☐ No	☐ Yes ☐ No
Anxiety disorders	**F41.0, F41.1, F40.10, F41.9**	☐ Yes ☐ No	☐ Yes ☐ No
Obsessive-compulsive disorder (OCD)	**F42.2, F42.9**	☐ Yes ☐ No	☐ Yes ☐ No
Post-traumatic stress disorder (PTSD)	**F43.10, F43.11, F43.12**	☐ Yes ☐ No	☐ Yes ☐ No
Insomnia	**G47.00**	☐ Yes ☐ No	☐ Yes ☐ No
Substance use disorders	**F10 - F19 (depends on the substance)**	☐ Yes ☐ No	☐ Yes ☐ No
Gambling disorder	**F63.0**	☐ Yes ☐ No	☐ Yes ☐ No

3. Other questions

1. Do I have out-of-network outpatient mental health benefits? What is my deductible, how much have I met, and what is my coinsurance or reimbursement percentage?
2. Is prior authorization required for psychological testing from an out-of-network provider? Who requests it, and how long does approval take?
3. What amount does the plan allow for each code, and is there a limit on units or hours per year?
4. Does the plan exclude testing requested for school or work documentation?
5. How do I submit a superbill, and what is the filing deadline?

Record of your call

Date: _____ Representative: _____ Reference number: _____