How to Check if Your Insurance Will Reimburse for Therapy

If The Speech Spot is out-of-network with your insurance plan, you may still be able to receive partial reimbursement for therapy services. This guide will help you understand exactly what to ask your insurance company so you can make the most of your benefits.

Step 1: Call Your Insurance Company

Use the member services number on the back of your insurance card. When you reach a representative, say something like: "I'm planning to see a licensed Speech-Language Pathologist and/or Occupational Therapist out-of-network. Can you tell me what my out-of-network benefits are for outpatient therapy?"

Step 2: Ask These Key Questions:

1. Do I have out-of-network benefits for speech and/or occupational therapy?
2. What percentage of the fee will you reimburse (for example, 60% or 80%)?
3. What is my out-of-network deductible, and how much of it have I met this year?
4. Is pre-authorization or a doctor's referral required?
5. Are there visit limits for speech or OT per year?
6. How do I submit a superbill or claim form for reimbursement?
7. Where should I send it (mail, fax, or upload)?

Step 3: Ask About the "Allowed Amount"

Insurance companies reimburse based on an allowed amount, which may be lower than the therapist's fee. You can ask: "What is the allowed amount for CPT code 92507 (speech therapy) or 97530 (occupational therapy)?" This helps you estimate how much they'll reimburse.

Step 4: Keep and Submit Your Superbills

After each month of sessions, The Speech Spot will provide a superbill — a detailed receipt including CPT and diagnosis codes, provider credentials, and tax ID. Submit this to your insurance as instructed (mail, fax, or online portal) for reimbursement.

Example:

Session Type	Rate	Insurance Reimbursement (60%)	You Receive
30-min Therapy Session	$90	≈$54	$54 back after deductible

Pro Tip: Ask the representative for a reference number for your call. It helps if you ever need to follow up or appeal a claim later.