

## How to Submit Insurance Claims

- 1. Contact your insurance company to see if you have OUT OF NETWORK PROVIDER BENEFITS. If so, you may ask what those benefits are.
- On your receipt for services from The Ross Center, you will find your procedure code (or CPT code) which is usually a 5-digit number, and your diagnosis code, or ICD-10 code. You will also have your providers NPI number and The Ross center's business information including our tax ID #.

## Commonly used procedure codes with range of rates depending on clinician:

Initial evaluation with psychiatrist- 99205- \$550-\$675

Initial evaluation with therapist- 90791- \$375-\$425

Follow up sessions with psychiatrist- 99214- \$275-\$295

Individual therapy sessions- 90834(45min) or 90837(60min)- \$240- \$325

Group therapy sessions- 90853- \$130

DBT group for teens- Group 90853-\$240, Individual Therapy 90834-\$275

DBT group for adults- **90853-** \$130

Social Anxiety Group-90853- \$130

Resilience Builder Group-90853 \$130

REACH group-90853 \$130

SPACE group- 90853 \$175

ALL VIRTUAL SESSIONS WILL HAVE A +95 MODIFIER TO INDICATE TELEHEALTH Sample ICD-10 codes:

Major Depressive Disorder, recurrent- F33.1

Generalized Anxiety Disorder- F41.1

ADHD, unspecified- F90.0

3. You can use the information on your receipt to find out from your insurance company what they will reimburse you for our services. You can use the codes above as examples and ask your insurance company what they will reimburse you for your session. This will give you an idea of what you are responsible in terms of cost.



- 4. Additionally, you will most likely have a deductible. This is the amount of money your insurance company expects you to spend before the insurance starts to pay you back. You can ask what your deductible is and how much of it you have already spent.
- 5. Once you have paid for services at The Ross Center, you must fill out a medical claim form and submit it to your insurance company for reimbursement. You can usually find the form and instructions for submission on the website for your insurance company. If not, please contact your insurance company for forms and instructions. Make sure to complete the forms with all the required information.
- 6. Please do NOT check the assignment box on your claim form. If you check it the reimbursement check will come to The Ross Center and we will have to send it directly back to your insurance company so they can reissue the check to the patient. This will delay your reimbursement.
- 7. While our staff does not complete the insurance claim forms for you, you should mail completed claim form along with copy of Ross Center receipt to your insurance company claim's mailing address. Wait up to 30-60 days (in most cases) for reimbursement.
- 8. Please do not refer your insurance company to The Ross Center. We do not participate with any insurance companies, are not in network for any companies, and do not handle claims. We are happy to answer questions as best we can, however, please note that all policies and benefits are different, and we cannot be responsible for decisions your insurer makes about reimbursement. Additionally, insurance companies will not speak with us on your behalf about reimbursement typically.

Revised 04 07 2023

Vienna, VA 22182

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