

Know Your Insurance Plan!

Acceptance into one of Buffalo Hearing & Speech Center's Specialized Programs does not guarantee insurance coverage.

As we all have learned at one time or another, having an insurance card does not mean that all services will be covered! Make sure that you are an informed consumer and research your insurance plan. Every plan is unique, and it is your responsibility to understand the type of coverage you have.

If you haven't already done so, we strongly encourage you to contact your health insurance carrier and ask the following:

- What are my benefits for habilitative speech language therapy?
 - It's important to clarify the type of coverage, as policies may state that there is a speech therapy benefit, but may not state under what circumstances a member has coverage.
 - Specialized Programs are billed using the CPT Code 92507.
- Is there a limit to the number of speech therapy sessions I can receive in a year? (Specialized Programs last a total of 20 sessions)
- Do I share my speech benefits with any other therapies (PT/OT)? Have I used any of my sessions on those?
- What is my financial responsibility?

Each insurance policy has its own parameters, but most coverage will involve at least one, if not all four of the following patient responsibilities. Each of these are separate items and having responsibility for one does not eliminate responsibility for others:

- Deductible: The amount you pay for covered health care services before your insurance starts to pay.
- Copay/Copayment: A fixed amount for a covered service, paid by a patient to the provider of the service before receiving the service. The amount may vary by the type of service.
- Coinsurance: The percentage costs of covered health care service you pay (For example, 20%) after you have paid your deductible.
- Non-Covered Service: 100% of the payment is the patient's responsibility.

Please remember that Specialized Programs are billed per class. For example if someone has a copay, the copay amount should be multiplied by 20 for an accurate representation of the total cost of program tuition. The same holds true regardless of the type of patient responsibility that exists in your contract (deductible, coinsurance, non-covered services, etc.)

We cannot stress the importance of being familiar with your insurance policy and benefits. While we do check your benefits, we do so just prior to the start of classes. Families who are able to find out about their benefits in advance are often able to make informed decisions, regarding changes to their child's program schedule before classes fill up or the deadline for refunds passes. They also report a better overall experience.