

## Frequently asked questions:

### What does the assessment process look like at Cooper House?

Our assessment process typically includes 1-3 caregiver/parent sessions, 2-4 observational sessions of the child and parent/caregiver, school setting observations, and 1-2 follow-up discussions with caregivers/parents without the child. The assessment sessions can range from 50-75 minutes per session. The entire assessment process typically takes about 2 months.

### Are sessions in person?

The majority of the assessment and treatment sessions are conducted in person at one of our Seattle sites. Some sessions such as caregiver/parent assessment interviews and parent support sessions could be conducted via Zoom.

Please visit our website to view our building addresses: <https://www.cooperhouse.org/our-building-2>

### Who needs to be a part of the assessment and treatment sessions?

At least one caregiver and the child need to be part of the assessment sessions, though we strongly encourage all caregivers to participate. For example, if the child has two parents, both parents participate in assessment sessions. If your child is in a school or childcare setting, we also recommend a school/childcare observation visit so our therapists can see your child interacting with peers and their professional caregivers. After the assessment process is complete, therapists will make recommendations and discuss with you who will be a part of the treatment sessions. This will include a discussion and recommendation from the therapists about which professionals (Occupational Therapist and/or Mental health Therapist) will be a part of the therapy sessions.

### How long are typical treatment sessions?

A typical treatment session lasts 50 minutes. The session usually recurs every week on the same day and at the same time. The session may include one or both mental health and occupational therapists depending on the recommended plan of care.

### Do you take my insurance?

Below is a list of the major insurances that we can submit claims to currently. Keep in mind, each insurer has a myriad of plans and not all our clinicians are in-network with each plan. It is both confusing and frustrating, so we do our best to verify the insurance plan coverage as it pertains to our services. If we are out-of-network with your plan but you have out-of-network benefits, we will submit claims to your insurance company on your behalf.

- **Premera & Lifewise** – certain plans require PCP prior authorization for all services; most Individual and Group PPO plans through Premera consider all therapists to be in-network.
- **Regence** – most PPO plans consider us in-network although our associate level therapists are not able to bill this insurance; some plans may require pre-authorization for certain services. **Regence Group Administrators** (RGA) is billed the same as Regence.
- **Kaiser** – we are in-network with only the PPO plans such as Options and Access PPO. There are authorization requirements for both OT and Mental Health for Kaiser HMO plans. These authorizations need to be in place before services can be scheduled. Our associate level therapists are not able to bill any Kaiser plans.
- **UnitedHealthcare** – Mental Health is in-network for **most** of the commercial plans and plans that use the UnitedHealthcare net. All plans require verification before scheduling due to the complexity of prior authorization requirements. We are not contracted with any UHC plans offered through the WA State Health Exchange. Our OTs are considered out-of-network with all UHC plans but can bill if the plan includes out of network benefits. Our associate level therapists cannot bill for services.
- **BCBS plans** – we are in-network with most PPO plans, although our associate level therapists are not able to bill this insurance.
- **Aetna** – we are in-network with most of the plans available in WA State, and other insurances that use the Aetna provider network (ie: **Meritain Health**).
- **CIGNA** – we are out-of-network with all Cigna plans but can bill if out-of-network benefits are available for PPO plans. We can also explore Out of Network exceptions for Mental Health once the assessment phase is concluded. We are unable to bill to CIGNA HMO plans.

Please refer any billing/insurance questions to Paula Hardy, Accounts Manager, 206.946.8604 or [phardy@cooperhouse.org](mailto:phardy@cooperhouse.org).