

**FOR CALIFORNIA MFTs, LCSWs, LPCCs, and LEPs:
SELF-STUDY CEU ANSWER SHEET AND ATTESTATION**

**"Navigating the Insurance Maze: The Therapist's Complete Guide to Working with Insurance --
And Whether You Should," by Barbara Griswold, LMFT**

*Course meets qualifications for 7 hours of continuing education credit for California MFTs, LCSWs,
LPCCs, and LEPs as required by the California Board of Behavioral Sciences*

*(Barbara Griswold, MFT, CAMFT-Approved CE Provider #023504)**

ATTESTATION: I attest that I personally read the book "***Navigating the Insurance Maze: The Therapist's Complete Guide to Working With Insurance -- And Whether You Should***" and completed the evaluation and post-test myself.

Signature: _____ Phone: _____

Name (print clearly): _____ Date Taken: _____

License Number: _____ License Type: MFT LCSW LPCC LEP Other _____

E-mail address (print clearly): _____

Confirm E-mail address (print clearly): _____

- | | | | | |
|----|----|-----|-----|-----|
| 1. | 5. | 9. | 13. | 17. |
| 2. | 6. | 10. | 14. | 18. |
| 3. | 7. | 11. | 15. | 19. |
| 4. | 8. | 12. | 16. | 20. |

TO RECEIVE YOUR CE CERTIFICATE:

- 1. Complete this answer sheet and return with your evaluation by mail to Barbara Griswold at 4010 Moorpark Avenue #118, San Jose, CA 95117 (or scan and send BOTH via e-mail to orders@theinsurancemaze.com). **WE MUST HAVE BOTH DOCUMENTS.****
- 2. Pay your fee**.** If you have not already paid your fee, you may send a check for \$25 (made payable to Barbara Griswold) to the address below or pay at my website www.theinsurancemaze.com/store.
- 3. IMPORTANT: A score of 70% or MORE on this post-test is required in order to get CE credit for the course.** If you achieve this score, your CEU certificate will be sent via e-mail, or you may request we mail it. You will be notified if the score is not reached.

**Barbara Griswold, LMFT is approved by the California Association of Marriage and Family Therapists to sponsor continuing education for MFTs, LCSWs, LPCCs, and LEPs. Barbara Griswold, LMFT maintains responsibility for this program/course and its content. www.theinsurancemaze.com 408.985.0846 4010 Moorpark Avenue #118, San Jose, CA 95117*

****Fees and credit hours are subject to change.**

Grievance Policy: If a participant files a grievance regarding the course level or content, program administration, or non-receipt of certificates, the individual will be asked to put his/her comments in writing. All complaints will be responded to in an ethical and timely manner. If requested, the attendee will be given a refund of the fee. Refunds will be issued within 7 days of request. Questions and concerns should be addressed to Barbara Griswold at the address and phone number above.

Refund Policy: Full refunds for non-completion will be granted when request is submitted in writing and a post-test has not been submitted and graded. Refunds will be issued within 7 days of request.

Accommodations for those with Disabilities: Arrangements can be made for those with disabilities or special needs. To discuss further, please contact Barbara Griswold, LMFT at barbgris@aol.com or 408-985-0846

**FOR CALIFORNIA MFTs, LCSWs, LPCCs, and LEPS:
Barbara Griswold, LMFT (CAMFT- APPROVED CE Provider # 023504)**

4010 Moorpark Avenue #118, San Jose, CA 95117

www.theinsurancemaze.com 408.985.0846 barbgris@aol.com

Test Questions for 7 Continuing Education Units

Navigating the Insurance Maze: The Therapist's Complete Guide to Working With Insurance – And Whether You Should

- 1. Health Maintenance Organizations (HMO) differ from Preferred Provider Organizations (PPOs) in that**
 - a) HMO plans only cover sessions the client has with network providers; PPO clients can also go out of network but pay more.
 - b) HMO sessions are free to the client.
 - c) all HMO plans have all providers under one roof.
- 2. A deductible is defined as**
 - a) the fixed, flat fee that an insurance plan may require a client to pay for each visit.
 - b) the fee the insurance plan has decided is reasonable for the service provided.
 - c) the dollar amount that a client may have to pay before his/her insurance plan begins to reimburse for medical expenses.
- 3. Which of the following is true about being an "out-of-network" provider?**
 - a) You must accept the contracted insurance plan rate as payment in full for services provided.
 - b) You agree to bill the insurance for reimbursement.
 - c) You can collect your full fee, and you don't need to bill the insurance plan.
- 4. True or False:** If a therapist accepts insurance and becomes an insurance provider, s/he is therefore a "covered entity" under the Health Insurance Portability and Accountability Act (HIPAA), and will need to follow all the directives of HIPAA.
- 5. In 2010, federal parity legislation expanded parity coverage to almost all plans in all states. This legislation**
 - a) states that insurance plans must reimburse for any services the client desires, even if not medically necessary.
 - b) requires that, in most health plans, mental illnesses be covered at the same rate as medical illnesses.
 - c) requires insurance plans to cover young adults up to age 26 on their parents' policy.
- 6. Which statement about parity legislation is NOT TRUE?**
 - a) Some clients now have lower copayments and deductibles than they had prior to this legislation.
 - b) Most clients now have unlimited sessions (as long as the plan feels they are medically necessary).
 - c) Some plans (e.g. self-insured, small group and individual plans) are exempt from the federal parity law.
 - d) Clients with unlimited sessions are no longer subject to treatment reviews by the health plan.
- 7. To avoid treatment disruption, when making a first appointment with a client, it is recommended that the therapist**
 - a) ask for the client's insurance information on the phone before the first session, and call the insurance plan in all cases.
 - b) encourage the client to call the insurance plan themselves, before the first session.
 - c) Wait until you submit the first claim to the plan to see if you are paid.
- 8. Which of the following is NOT one of the author's suggested 13 Essential Questions to ask the insurance plan when checking coverage?**
 - a) "What is the copayment or coinsurance amount?"
 - b) "What is the deductible, if any?"
 - c) "What is the CPT code for the treatment I am providing?"
- 9. If your treatment is reviewed by the insurance plan, further treatment may not be approved if**
 - a) the client appears to be making "too much" progress and if symptoms appear too mild to warrant further treatment.
 - b) the client appears to be making "too little" progress and therapy doesn't appear to be helping.
 - c) the plan feels the client could be helped just as much by a lower level of treatment (such as a community self-help group).
 - d) all of the above

CONTINUED

- 10. A CPT code is a code that codes on the bill or claim telling the insurance plan**
- the diagnosis.
 - the place of service.
 - the time of service.
 - the type of service that was provided (ex. family, couples, 45-minute therapy, 60-minute therapy, etc).
- 11. True or False:** Insurance plans only cover treatment they consider to be medically necessary. For example, if your client seeks treatment for self-esteem or personal growth and has no symptoms of a mental illness, the plan may not cover this.
- 12. What is a single-case agreement?**
- When a client has lost his insurance coverage and you agree to see him at a discounted rate
 - When a client wants an extended session and you agree to see him for extra time
 - When the therapist agrees to waive copayment from a specific client due to inability to pay
 - When an out-of-network provider, for one case, contracts with the health plan to act like a network provider, usually because the client could not find someone in their network with the needed availability or expertise.
- 13. True or False:** When the client of an out-of network provider submits a therapy invoice to an insurance plan, the plan has the right to interview the therapist and inspect treatment records in order to determine if medical necessity exists for treatment.
- 14. True or False:** All insurance providers MUST obtain a National Provider Identifier (NPI).
- 15. True or False:** On the CMS-1500 health insurance claim form, providers no longer must provide their Tax Identification Number (TIN) or Employer Identification Number (EIN), as these have been replaced by the National Provider Identifier (NPI).
- 16. If a therapist is a HIPAA-covered entity, which of the following is true?**
- The therapist is only required to give a Notice of HIPAA Privacy Policies to clients for whom s/he will submit insurance claims.
 - The therapist is required to give a Notice of HIPAA Privacy Policies to all clients, even those that are not using insurance.
 - The therapist is only required to give a notice of HIPAA Privacy Policies to clients for whom s/he will submit electronic claims.
- 17. If a claim is denied, the author recommends a therapist's first response should be to**
- write a letter to the appeals department discussing the situation and why the claim should be paid.
 - call the insurance plan to find out more about why it was denied.
 - contact the State Department of Insurance.
- 18. You are a network provider, and the client has an unused deductible. For the first sessions, you should**
- collect your contracted rate, and submit bills to the insurance so that these payments can be credited toward the deductible.
 - collect your full fee, but don't bother billing the insurance until the deductible is used up.
 - collect your full fee and submit claims so that these payments can be credited toward the deductible.
- 19. Which of the following is NOT an example of possible insurance fraud?**
- Giving a diagnosis when none exists (or changing a diagnosis) in order to be reimbursed
 - Changing a session date or CPT code, in order to be reimbursed
 - Offering clients a payment plan
- 20. During treatment reviews, insurance plan case managers will typically be MOST interested in:**
- billing issues.
 - your theoretical conception of the case.
 - the client's childhood issues.
 - the client's current symptoms, as well as your diagnosis, interventions and your treatment plan.

Please fill out and return answer sheet on the next page.
A passing score of 70% is required for CE certificate.

*Barbara Griswold, LMFT is a Continuing Education Provider approved by the
California Assn. of Marriage and Family Therapists (CAMFT) #023504.
Continuing Education Credits may only apply to California therapists.*

CONTINUED

Print Therapist Name: _____

DISTANCE LEARNING EVALUATION

Book Title: "Navigating the Insurance Maze: The Therapist's Complete Guide to Working with Insurance -- And Whether You Should" by Barbara Griswold, LMFT Credit Hours: 7 for California MFTs, LCSWs, LEPs, and LPCCs

New Continuing Education Requirements mandate an evaluation be completed on all distance-learning classes in addition to a post-test. Your completion will also help us continually improve our course content.

Please use the following scale for quantitative questions below, NOTE: TO AGREE, USE 4 or 5

Strongly Disagree Disagree Neutral Agree Strongly Agree

LEARNING OBJECTIVES

1. After taking this course, participants will be able to:

A. Identify one important difference between HMO and PPO plans	1	2	3	4	5
B. Identify one important way the Parity Act has affected mental health treatment	1	2	3	4	5
C. Fill out a CMS-1500 claim form correctly to avoid denials and treatment disruption	1	2	3	4	5
D. Identify one way client confidentiality may be affected when insurance is billed	1	2	3	4	5
E. Define the concept of "Medical Necessity" as it relates to treatment reviews	1	2	3	4	5
F. List 13 important questions to ask when checking coverage to avoid future denials	1	2	3	4	5

AUTHOR

2. Provided accurate, current information					
3. Was knowledgeable about the subject area	1	2	3	4	5
4. Effectively and clearly presented material	1	2	3	4	5
5. Maintained my interest	1	2	3	4	5
6. Provided useful sample forms and worksheets	1	2	3	4	5

GENERAL

7. How much did you learn from this course/book?	Very Little	Little	Some	A Good Bit	A Great Deal
8. How would you rate the overall value of this course?	Very Poor	Poor	Average	Good	Excellent
9. Was course/book level appropriate to your education, experience, and licensure level?				Yes	No
10. Would you recommend this course/book to others?				Yes	No
11. Was the course/book relevant to your practice?				Yes	No
12. Was course/book user-friendly?				Yes	No
13. If you had questions related to this course or getting credit for reading it, were they addressed effectively and in a timely manner?			N/A	Yes	No

CONTINUED

Print Therapist Name: _____

EVALUATION (continued)

14. The most helpful part(s) of this book/course:

15. Suggestions for improvement? _____

16. Any other comments: _____

WE MUST RECEIVE THIS 2-PAGE EVALUATION AND YOUR POST-TEST ANSWER SHEET FOR CE CREDIT. Your certificate will be sent via e-mail (unless you ask us to mail it).

TO RECEIVE YOUR CE CERTIFICATE:

- 1. Complete the test answer sheet and return with your evaluation** by mail to Barbara Griswold at 4010 Moorpark Avenue #118, San Jose, CA 95117 (or scan and send BOTH via e-mail to orders@theinsurancemaze.com). **WE MUST HAVE BOTH DOCUMENTS.**
- 2. Pay your fee.** If you have not already paid your fee, you may send a check for \$25 (made payable to Barbara Griswold) to the address below or pay at my website www.theinsurancemaze.com/store.
- 3. IMPORTANT: A score of 70% or MORE on this post-test is required in order to get CE credit for the course.** If you achieve this score, your CEU certificate will be sent via e-mail, or you may request we mail it. You will be notified if the score is not reached.

Barbara Griswold, LMFT

4010 Moorpark Ave. #118, San Jose, CA 95117 barbgris@aol.com 408-985-0846

www.theinsurancemaze.com