

THE MEDICAL HOME APPROACH

A Checklist for Parents of Children and Youth with Special Health Care Needs

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| INSURANCE AND MEDICAID COVERAGE Use these questions as a guide for speaking with your insurance company so that you are prepared for appointments with new providers: | Notes: |
| Do I have coverage for _____? (procedure, test, specialist, etc.) | |
| Do I have a deductible? How much is it? | |
| Do I have a co-pay? How much is it? | |
| Is <u>Name of Provider</u> in network with my plan? If not, who is in network with my coverage that offers a similar service? | |
| Do I need a referral or prior authorization (PA) for services? | |
| Who do I talk to if I have questions? Is there a number on your medical coverage card? (Ex: Ombudsman, social worker) | |

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| MENTAL HEALTH Use these questions as a guide when speaking with a mental health agency: | Notes: |
| I have _____ insurance; do you accept that? | |
| Are there age limits for services? | |
| What services does your agency provide? | |
| Do I need a referral from my child's doctor to be seen? | |
| Is there a waitlist? | |
| Does your clinic offer virtual appointments? How many virtual appointments are authorized under my insurance coverage? How often will my child need in person appointments? | |
| What are the options for crisis support? | |