

## **Insurance Reimbursement Information Kit:**

To improve your chances of receiving reimbursement for your light therapy device, make sure to send your insurance company the following documents/articles:

- Prescription from your psychiatrist or general practitioner
- letter of medical necessity (included in this packet). See instructions with letter
- Abstracts from professional journals (on reverse side of letter of medical necessity).
- “*Beginning to See the Light*” article from Archives of General Psychiatry (included in this packet).
- Invoice from Apollo for the light therapy device
- Your own cover letter to the insurance company. (See below.)
- Include all pertinent member information, policy #, referring physician and his/her number, date of service, and invoice for light therapy device.

The Archives article is perfect for sending to insurance companies. It is from the AMA and states that, "Light is now recommended as the treatment of choice for SAD." Highlight this statement and also write at letter to your insurance that says something like this:

To Whom it May Concern:

My doctor has prescribed the use of a 10,000 lux lightbox for the treatment of Seasonal Affective Disorder (DSMIV 296.3). The AMA recommends light therapy as the treatment of choice for SAD ( See attached article: Archives of Gen. Psychiatry, Oct 1998). Please review this request for reimbursement.

Sincerely,

(Your Name)