

Information about the reimbursement request

Since I don't have a ‚Kassensitz‘ (meaning I am a private psychotherapist) the statutory health insurance is not automatically paying for the therapy costs in my practice. You can request that the insurance is paying for the costs but it is not 100% sure that they will do so. Following steps are necessary:

- 1. Arrange an appointment for the obligatory ‘Sprechstunde’** (initial consultation) either via the “Terminservicestelle” (tel. number 116117) or online via <https://eterminservice.de/terminservice>. This should serve as a path to find a psychotherapist in the public health system. Unfortunately the psychotherapist most likely won't be able to offer you a therapy spot, but he/she will fill out a form (**PTV11**), which you will need for the reimbursement request.
IMPORTANT: ask for a tick at ‘**promptly required**’ and the ‘**urgency sticker**’
- 2. Contact public psychotherapist with a ‘Kassensitz’**
You need to prove the health insurance that you tried to get a therapy spot with a public psychotherapist. Therefore document your research and keep track of:
 - Date and time of contact
 - Result of the approach (could you arrange an appointment or not?)
 - Waiting time for the appointmentYou will need to provide a list of 15-20 (the more the better) therapists who don't have any free spots or a waiting list longer than 3 months. You are not committed to take a spot with a therapist who is 30min away from your apartment.
- 3. Contact your health insurance** directly and ask them for a consultation about the reimbursement request (‘Kostenerstattungsverfahren’). If they can't offer you this, document that as well!
- 4. Arrange an appointment at a general practitioner/psychiatrist:** ask him/her to fill out a ‘**Konsiliarbericht**’ (for psychotherapy) and ask for a ‘**ärztliche Notwendigkeitsbescheinigung**’. These documents show that there is a need for treatment and that there are no medical objections against that treatment.
- 5. Write a request for reimbursement:** write a personal letter to your health insurance and argument why they should cover the costs at the private practice.
- 6. Together with a letter from me** (stating why I think psychotherapy is necessary) and **prove of my degree** you can now send all the documents to the health insurance. Please send the documents **registered** (otherwise the health insurance might argument that they didn't get them). They will have 3 weeks until they need to get back to you! If not call them and ask about the request!

7. In case the reimbursement was declined: you can then lodge an objection ('**Widerspruch**'). This can be done directly with the health insurance or with a lawyer.

Checklist:

- ✓ PTV11 (from the Sprechstunde)
- ✓ Contact health insurance for help
- ✓ List of therapists (15-20 or more) who cannot offer you a therapy spot in the next 3 months
- ✓ Konsiliarbericht und ärztliche Notwendigkeitsbescheinigung from your general practitioner
- ✓ A personal letter with your request
- ✓ A personal letter from me + prove from my degree
- ✓ Send all the documents registered – the health insurance has 3 weeks to get back to you

In case the reimbursement request is approved:

Initially they will only approve 4 sessions (the costs per session are 153€ - in case the health insurance is only covering a part of the costs you will need to pay for the difference). In those 4 sessions I need to conduct a lot of information because I will then need to write a report on why I think more sessions are necessary and how many. This information will then be send to an external consultant. The health insurance will have 5 weeks to decide about this request. This is a normal procedure in psychotherapy and has nothing to do with the reimbursement request.