

James Madison University
Occupational Therapy Clinical Education Services
Phone: 540-568-4980 Fax: 540-568-3886

Mailing Address:
601 University Blvd, MSC 9022
Harrisonburg, VA 22807

Physical Address:
131 W. Grace St., Rm 1100
Harrisonburg, VA 22807

Getting Started Checklist

Please use this checklist to guide you in preparing for your initial visit to OTCES.

Schedule Your Appointment

- Contact the James Madison University's Occupational Therapy Clinic via phone (540)-568-4980 or email (colwelcl@jmu.edu) to schedule an appointment. An OTCES representative can gather the necessary information to start the process. If a representative is not available, a message can be left and follow up contact will be made within 2-5 business days.

Insurance

JMU OTCES is a participating provider with the following insurances: Anthem BC/BS, Anthem Healthkeepers, Cigna, Coventry Southern Health, Aetna, MAMSI, OneNet PPO, Stratose, and Virginia Premier.

- Contact your insurance provider, if applicable, to determine occupational therapy benefits (see *Recommended Questions for Determining Benefits* to assist with this process.)

Physician's Order

- Obtain a prescription/referral for occupational therapy evaluation and/or services from your child's primary physician. The prescription/referral can be faxed directly to OTCES (540.568.3886) by the referring physician and should include the requested services (i.e. OT evaluation and treatment) and a treatment diagnosis. (see *Physician Referral for Occupational Therapy Form*).

Required Documents

Please review and complete the following forms and documentation prior to your initial visit. These forms are available on our website (<http://otces.cisat.jmu.edu/>) or will be mailed upon request. Please bring these forms with you to your initial appointment.

- OT Intake Form (please include prior evaluations, IEPs, IFSPs, medical records, etc.)
- Informed Consent for Services Form (please review the OTCES Policies and Procedures & the Description of Services & Fee Schedule.)
- Acknowledgements Form
- Documentation of Receipt of Privacy Practices Form (please review the Notice of Privacy Practices.)
- Parking Permit Form
- Release of Information Form (if needed)
- Reduced Fee Application Form (if needed)
- Insurance card

Thank you so much and we look forward to working with you and your family.