



**Prospect Kids LLC**  
2102 Avenue Z Brooklyn, NY 11235  
(347)-921-3250 prospectkids@yahoo.com

## ABA Therapy Application

Welcome to Prospect Kids! Thank you for your interest in Prospect Kids ABI therapy services. We will reach out within 1-2 business days to review all information filled out in the form below.

All ABA therapy will be provided through commercial insurance and requires a diagnosis of Autism. If you do not already have a diagnosis we can perform a diagnostic evaluation.

Please do not hesitate to reach out with any questions you may have in the meantime by sending an email to Prospect Kids at [prospectkids@yahoo.com](mailto:prospectkids@yahoo.com) or calling 347-921-3250 Ext 105.

### Applicant Information

Name: \_\_\_\_\_ Date: \_\_\_\_\_  
*Last First M.I.*

Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_  
*Street Address Apartment/Unit #*  
\_\_\_\_\_  
*City State ZIP Code*

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Insurance Provider:

Aetna

Anthem

Blue Cross

Cigna

Evernorth

Fidelis

GEHA

Oscar

Optum

United

Wellcare by Fidelis Care

Other: \_\_\_\_\_

Please provide your insurance member ID/ policy number: \_\_\_\_\_

\_\_\_\_\_

### Disclaimer and Signature

*I have answered all information to the best of my knowledge.*

Signature: \_\_\_\_\_

Date: \_\_\_\_\_