

Questions for Insurance Company:

Getting answers about your Out-of-Network Benefits

The following steps will help you gain the information needed to determine if your insurance company will reimburse you, at least in part, for psychological services from this private practice.

Steps to determining your benefits

- Call the customer service number on the back of your insurance card (there may be a separate number you can call for mental health or behavioral health plans that are not directly under your medical plan).
- The following script may be helpful:

“I will be seeing a Clinical Psychologist who does not participate with my plan, but Do I have out-of-network benefits that can be used to receive reimbursement, in part or in whole? “ YES/NO

If YES: *“I will be seeing this psychologist for psychological services rendered via teletherapy. What are your reimbursement rates?”*

Then ask the following:

“Do I have an annual deductible that must be met?” YES / NO

If YES: *“Has my deductible been met yet for this year?”* YES / NO

“What is the reimbursement rate for Individual psychotherapy (code 90834 or 90837)?” _____

“Is there a maximum number of visits allowed per year?” YES / NO

If YES: *“How many?”* _____

Added notes to record here:

Be sure to record the date, time, and customer service representative you spoke with, in case you must reference this call with your insurance company in the future for your filed claims.

Insurance Representative Name _____ Date _____