

Important Questions for Your Therapist and Insurance Carrier



QUESTIONS FOR A THERAPIST

- Are you a preferred provider? If yes, for which insurance companies?
- Do you submit the bill to insurance?
- Do you collect payment from insurance?
- What will my co-payment be at the time of service if you accept insurance payments?
- What happens to my therapy and fees if the insurance company denies payment?
- Will you help me appeal a denial of payment for services?



QUESTIONS FOR YOUR INSURANCE CARRIER



- Is there a separate deductible for mental health? If so, what is it?
 - Do I have a co-payment? If so, what is it?
 - What do you consider the usual and customary fee for my therapist? What percentage do you reimburse of the usual and customary fee?
 - Which diagnoses do you cover?
 - What type of sessions do you cover? For which CPT codes do you reimburse?
-
- What do you cover if I need a session that lasts longer than 45 minutes? 60 minutes? Under what conditions will you cover additional time for a session?
 - What happens if I need more than two sessions a week?
 - Is there a limit to the amount of money that you will pay during a year of treatment? A lifetime limit?
-
- Do you cover intensive outpatient or partial hospitalization?
 - What do you cover for inpatient acute psychiatric care? Which hospitals are in your network?
 - Do you cover the psychiatrists who provide treatment in an inpatient setting? What happens if they are not in network?
 - Is there a limit to the number of outpatient, IOP or PHP or inpatient sessions/days that I have allotted to me?
 - If I need emergency care, do I have to notify you that I need that care? Is it enough if just the hospital staff notify the insurance company?