

Steps for speaking with your insurance carrier about your mental health benefits

Here are some helpful tips about how to speak with insurance about your mental health benefits:

Call the number listed on the back of your primary insurance card for "Mental Health Benefits" or "Behavioral Health Benefits". If there is no separate number for either of these options, call the customer service number.

Give them your insurance ID number and ask them the following questions:

Is Symmetry of Self Counseling Center an in-network provider for my mental/behavioral health benefit plan? ____yes _____no

 For Heather McPaul her National Provider Identification Number (NPI1) is: 1760849251
 For Donna Graf her National Provider Identification Number (NPI1) is: 1083966550
 Our group National Provider Identification Number is (NPI2) is: 1003457060

 If "no", then you will need to ask if you have OUT-of-network benefits for mental health services, and then ask the same questions below in terms of out-of-network

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2.	Are these "valid & billable codes"?	
	90791? (intake assessment)yesno	
	90834? (45 min. therapy session)yes	_nc
	90837? (60 min. therapy session)yes	_nc

	90847? (60 min. Family or couples therapy with the patient present)
	yesno
	90846? (60 min. Family or couples therapy without patient present)
	yesno
	90853? (group therapy)yesno
3.	Do these codes require preauthorization?
4.	How many sessions per year does my insurance cover?
5.	Do I have a deductible? \$
	(Is there a separate family deductible vs. individual?)
	How much of it have I met? \$
6.	What is my co-insurance or co-pay amount for each session? (usually, this will apply AFTER you have met your deductible—ask to make sure) \$