



SYMMETRY OF SELF COUNSELING CENTER

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:

1. Is Symmetry of Self Counseling Center an in-network provider for my mental/behavioral health benefit plan? ___yes ___no
 - a. Note: our group National Provider Identification Number (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 benefits).
2. Are these “valid & billable codes”?
 - 90791? (intake assessment) ___yes ___no
 - 90834? (45 min. therapy session) ___yes ___no
 - 90837? (60 min. therapy session) ___yes ___no
 - 90847? (60 min. Family or couples therapy with the patient present)
___yes ___no
 - 90846? (60 min. Family or couples therapy **without** patient present)
___yes ___no
 - 90853? (group therapy) ___yes ___no
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) \$_____