

Checking Coverage: Essential Questions

Before calling Insurance:

Info to give your Marriage & Family Therapist and to the Insurance Company

1. Client, (you):
2. I.D. # on card:
3. Insured's name(if not you):
4. Insured's I.D.#:
5. Relationship to insured, (son, daughter, husband, wife, etc.)
6. Group/Account number:
7. Insured's Date of birth:
8. Client's Date of birth:
9. Insured's Employer:
10. Insurance Phone Number (*The card may say "MH/SA Benefits," "For Pre-Authorization," "Customer Service":*

Go to next page for questions to ask your insurance company ...

When calling your insurance company to check about coverage, ask the following 12 questions:

1. Copayment(flat fee) or Coinsurance(percent):

2. Deductible (if there is one, how much?):

3. Sessions Allowed per year without review(if review):

4. When Do Benefits Start & Renew: Effective: __/__/__ Renew: __/__/__

5. Deductible met so far this year: \$____.____

6. Is Pre-authorization Needed?(For some plans, authorization is needed only after a certain number of sessions) No__ Yes__ Needed after visit#__

If yes, Auth#_____

of Sessions Authorized:_____

Starts: __/__/__ Expires: __/__/__

7. Claim form: HCFA/CMS 1500?(For MFT to complete with you and send to insurance company after sessions have been completed) Yes__ No__

8. Claims address:

9. Is Couples/Family Therapy covered? Yes__ No__

10. Is my MFT a network provider on my plan?

11. Does my plan include Out-of-Network Mental Health benefits? Yes__ No__ If yes, What is the Co-pay/% of fee paid? _____

What is the deductible? _____

12. Is my MFT's fee within the plan's UCR(Usual, customary, reasonable fee)These may be out-of-date but are meant to be approximate fees for the geographic area. Yes__ No__

***Adapted from Navigating the Insurance Maze: The Therapist's Complete Guide to Working with Insurance—And Whether You Should, by Barbara Griswold, LMFT*