

Obtaining your Outpatient Mental Health Benefits

- Step 1:** Locate the customer / member services phone number on your insurance card. Note if there is a separate number listed for mental health.
- Step 2:** Call and go through the steps to get information on benefits – choose whatever option will allow you to speak with a representative.
- Step 3:** Ask the benefits representative for your **outpatient mental health benefits**. Ask for both your in-network and out-of-network benefits. Make sure you get answers to all of the questions below, and ask the representative to explain any terms, exclusions, or other details that you might have questions about.
- Step 4:** If your plan requires authorization, make sure to obtain it, following directions below.
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Please provide us with the following information in order for us to bill your insurance company.

Insurance company _____ Customer Service # _____
Name of the primary person insured on the plan: _____
What is their date of birth: _____
ID # _____ Group# _____

Information needed for in-network benefits:

- Name of the representative you spoke with: _____
 - Do your benefits run on a CALENDAR or BENEFIT year? _____
 - What is your deductible? \$ _____
 - How much of your deductible have you met this year? \$ _____
 - What is your co-pay for mental health office visits (code 90806)? _____
 - What is the maximum number of visits allowed? _____
 - What is the maximum amount (\$) your insurance company will cover? \$ _____
 - How many visits / how much \$ have you used so far this year? _____
 - What is the mailing address for claims? _____

 - Is authorization or pre-certification required prior to the first visit?** _____
If yes, either obtain the authorization, or obtain the phone # for authorizations and call that department. Phone # _____
Name of the provider you will see (if the authorization is provider-specific): _____
Authorization # _____ (MAKE SURE THIS IS ACCURATE!!)
Number of sessions authorized: _____
Dates the authorization is effective: _____ - _____
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If you have more than one insurance (a primary and a secondary plan), repeat the steps above to obtain your secondary benefits and find out how much of your copay is covered.