

## Knowing What To Ask To Learn About Out-Of-Network Insurance Benefits

### **Information to have on hand when calling your insurance company**

1. Name as it appears on your insurance card
2. Date of birth of client
3. Insurance ID number, including any suffix
4. Contact information for Provider: Mark O'Brien, 605 N Michigan Avenue, (312) 316-7703

### **Questions to ask your insurance company**

1. What is my out-of-network benefit for outpatient mental health?
2. What is my coverage for these services and professional fees billed by Mark O'Brien:
  1. Diagnostic session (first two appointments), code 90791, professional fee is \$215
  2. Individual therapy, code 90837, professional fee is \$190
  3. Family therapy, code 90847, professional fee is \$215
3. Is a pre-authorization for services required?
4. How many sessions do I get under this benefit?
5. Is Mark O'Brien an acceptable provider for this benefit (they may ask for my tax ID number, 45-5605138, or my NPI number, 1932427986)?
6. What are the plan deductibles (note: until this deductible is paid in full, you will still have to pay *any provider, even those within your insurance network*, their full fee until the deductible is fulfilled; for example, if you're deductible is \$5,000 and a provider *in your network* has a session fee of \$175, you will still have to pay the full \$175 per session until you have fulfilled the \$5,000 deductible)?
7. What is the policy year (i.e. Jan 1– Dec 31)?
8. How much of the deductible has been met this year to date?
9. How do I get reimbursed directly once my deductible has been met?
10. To what mailing address, e-mail address or fax number should my superbills be sent (note: the superbill is your receipt of payment)?

Please note that I cannot guarantee coverage of services and my clients are responsible for payment at the time of service. I hope you find this out-of-network insurance guide helpful though to make the most of your insurance benefits if you decide to utilize them for counseling.