

# Out Of Network Insurance Benefits Guide

This guide is meant to be a helpful resource for you to check with your insurance company to find out if you have Out Of Network (OON) benefits.

This form contains A LOT. I know that it can feel intimidating to call your insurance company and I want to make you feel as prepared as possible for this call. There may be many unfamiliar terms in this guide, know that that's okay! All you have to do is follow the script on the next pages and write down the answers. Remember: your insurance company serves you! It's okay to ask them questions, ask them to repeat themselves or to speak more slowly. Take some deep breaths, have this guide with you to write on, and know that you can totally do this!

## **Sarah's information to reference if your insurance company asks:**

**Therapist name:** Sarah Santiago, MS, LPC, NCC

**Business name:** Bloom Counseling & Wellness, LLC

**Registered business address:** 2222 W. Grand River Ave, Suite A, Okemos, MI 48864

**Mailing address:** PO Box 923, Marquette, MI 49855

**NPI 1:** 1245706993

**NPI 2:** 1972079622

**Michigan license:** 6401015353

**Phone:** 906-428-6141

**Fax:** 906-292-7758

**E-mail:** Sarah@BloomMqt.com

**Website:** www.BloomMqt.com

**Specialties:** Emerging adulthood, higher education, anxiety disorders, eating disorders, adjustment disorders, life transitions

## **Your information to reference if your insurance company asks:**

**Policy holder's full name:**

**Policy holder's birthdate:**

**Policy holder's address:**

**Policy holder's phone number:**

**Policy holder's employer:**

**Be sure to have a copy of your insurance card with you to reference the numbers on the front and back of your insurance card**

# Script For Calling Your Insurance:

1

Call the number on the back of your insurance card.

Let them know you're calling about your benefits and they will likely ask you for the information on your insurance card to pull up your individual insurance plan. The info on the previous page will also be helpful.

2

Ask: "Does my plan include out of network benefits?"

**If the answer is "yes":** continue with the rest of this guide.

**If the answer is "no":** you don't need to continue with the rest of this guide. Unfortunately this means that you do not have OON benefits to help pay for your appointments with Sarah. You will need to pay without insurance, or by using an HSA/FSA card.

3

Ask: "Do my OON benefits cover routine outpatient mental health services (also called behavioral health)?"

**If the answer is "yes":** continue with the rest of this guide.

**If the answer is "no":** you don't need to continue with the rest of this guide. Unfortunately this means that you do not have OON benefits to help pay for your appointments with Sarah. You will need to pay without insurance, or by using an HSA/FSA card.

4

Ask: "Is prior authorization required for me to utilize my out of network benefits for mental health services?"

**If the answer is "no":** continue with the rest of this guide. This means you don't need prior approval from your insurance company to begin therapy.

**If the answer is "yes":** it means your insurance requires you to get prior approval in order to get reimbursed for therapy. Ask: "What are the steps required for me to get prior authorization for therapy?" write the details here:

**continue to the next page**

## Script For Calling Your Insurance... continued

5

Say: "Can you please let me know if the following CPT codes are covered in my OON benefits, and let me know what my reimbursement rates are?"

Use the chart below to write down your plan's benefits:

\*billing codes Sarah primarily utilizes with her clients

CPT billing code:	Service description:	Covered in my OON benefits? Yes or No	Reimbursement rate \$
*90791	Psychiatric Diagnostic Evaluation (First visit)		
90837	Psychotherapy, 60+ minutes		
*90834	Psychotherapy, 45+ minutes		
90832	Psychotherapy, 30+ minutes		

6

Ask: "Do I have an OON deductible and if so what is it?"

A deductible is the amount you will need to pay out of pocket before your insurance company will provide you reimbursement. If you have a deductible, write that amount here:

7

Ask: "How much does my plan cover?"

This might be called your co-insurance, or member cost-share. It is often calculated on a percentage basis. Write the details here:

8

Ask: "Will telehealth appointments be covered with my OON benefits and if so does my provider have to use a special telehealth platform to obtain reimbursement?"

Write the details here:

**continue to the next page**

9

Ask: "How do I submit my claims to get reimbursed?"

Sarah does not submit claims to insurance companies, so you will need to know the steps for you to take.

Write the details here:

10

Ask: "Do I need a special form to submit along with my superbill?"

A superbill is the name of the receipt that Sarah will provide you to give to your insurance company.

Write the details here:

11

Ask: "How will I be reimbursed?"

Sarah should not be sent the reimbursement from your insurance company, you will want to have the insurance company send the payment directly to you.

Write the details here:

12

Ask: "Can I please get your name and reference number for this call?"

Name:

Reference number:

Date/time of call:

**End of call, you did it!**  
**More tips on the next page...**

# Reminders and helpful tips

- Please know that it is your responsibility to know your insurance benefits and plan details, as well as to communicate any insurance requirements/issues with Sarah.
- For some people, it can feel intimidating to call about insurance, especially if it feels confusing. Remember that you have the right to understand your insurance benefits and it's okay to ask the representative to explain and help you understand your policy. Deep breaths, you can do this!
- It is your right to use your out of network benefits if you choose. Some insurance companies may try to encourage you to use an in network provider before giving you information about your out of network benefits. Remember that it's always okay if you want to work with an in network provider, but that your insurance company must provide you with the details of your benefits, including the answers to the questions on this form.
- You generally should not have to provide details about why you want to use your OON benefits because it is your right to do so. However it could be helpful in getting your claims processed/approved to provide some basic details about why you are seeking to work with me over another provider (common examples include: you have been referred for a specific treatment modality or specialty of mine, you cannot find another in network provider, etc.)
- If you believe that the representative does not know how to help you or is withholding information from you, you can ask to speak with another representative.
- Please note that Sarah does not accept single case agreements from insurance companies. Sarah should not have to submit anything to your insurance company for your OON claims to be accepted.
- Some insurance companies may try to get providers to utilize their software for telehealth appointments. Sarah pays for and utilizes a HIPAA compliant telehealth platform specifically created for virtual therapy and will not contract to use an insurance company's platform.
- Every insurance company is different. I have tried my best to create this guide and hope it will be helpful for you, however I cannot know all the steps that every insurance company will require.
- If you are having trouble getting information about your benefits, you may want to have your policy holder contact their HR department.
- If you feel that your insurance company is doing something illegal, and wish to file a complaint you should contact the Michigan Insurance Commissioner.