



QUESTIONS TO ASK YOUR INSURANCE or EAP PROVIDER

Page 1 is questions for your insurance company. Page 2 is questions to ask your EAP provider.

Health insurance policies are an agreement between you and your insurance company. To help you understand what coverage you can expect in relationship to outpatient psychotherapy (counseling), simply call your insurance company regarding outpatient behavioral healthcare and ask the following questions. Although not every area of treatment is covered on this form. It should clarify most questions and be useful in submitting claims.

INSURANCE QUESTIONS:

1) Professional Name of assigned clinician: _____

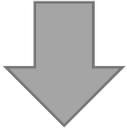
2) Name of Insurance company & number I called: _____

3) Date(s) I called my insurance company: _____

4) Name of the insurance representative who gave me the information: _____

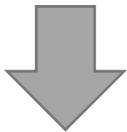
5) Is my clinician in-network?

YES, Go to #6. **NO**, this is the last question: What are my out-of-network benefits? _____



6) Does my policy require pre-certification or pre-authorization for treatment?

NO, go to #7. **YES**, How many visits will be pre-certified? _____



What are the effective dates of authorization? _____

What is the authorization number? _____

Continue with #7.

7) **PHYSICIAN:** Does my policy require a referral from a physician? **NO** **YES**

Have I received the referral from my physician? **NO** **YES**

8) **DEDUCTIBLE:** How much is it? _____ How much is left to meet it? _____

Are medical & mental health deductibles separate? _____

9) **YEAR:** How many visits do I have per year? _____ Is this calendar year or contract year? _____

When does that year start? _____

10) How much/what percentage do I have to pay at the time of service (co-pay)? _____

11) What are my in-network benefits? _____

12) Any other benefits or limits that I should know about? _____



Employers use Employee Assistance Program (EAP) companies sometimes as a health care benefit to employees. The employer will provide a specific number of sessions of counseling (paid for by the employer). To help you understand what your EAP benefits are, simply ask the EAP company the following questions. Although not every area of treatment is covered on this form, it should clarify most questions and be useful in submitting claims.

EAP QUESTIONS:

1) Professional Name of assigned clinician: _____

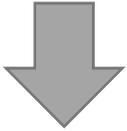
2) Name of EAP company & number I called: _____

3) Date(s) I called my EAP company: _____

4) Name of the EAP representative who gave me the information: _____

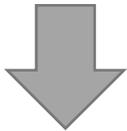
5) Is my clinician in-network?

YES, Go to #6. **NO**, this is the last question: What are my out-of-network benefits? _____



6) Does my policy require pre-certification or pre-authorization for treatment?

NO, go to #7. **YES**, How many visits will be pre-certified? _____



What are the effective dates of authorization? _____

What is the authorization number? _____

Continue with #7.

7) **PHYSICIAN:** Does my policy require a referral from a physician? **NO** **YES**

Have I received the referral from my physician? **NO** **YES**

8) Name of Employer providing EAP services? _____

9) Who is the employee with these benefits (client, spouse, parent)? _____

10) What do I need to do to access my EAP benefits? _____

11) How many EAP sessions are allowed? _____ Effective Dates of Authorization? _____