Spirit of Peace Clinical Counseling

QUESTIONS TO ASK YOUR INSURANCE COMPANY

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.

2. Name of the Person who gave me the information
3. Is my therapist in network? YES NO
If the answer to #3 is NO, skip to #7.
If the answer to #3 is YES, answer the following set of questions and skip #7- #9.
4. Does my policy require pre-certification or pre-authorization for treatment? YES NO
(If NO, proceed to #5.)
If YES, how many visits will be pre-certified?
What are the effective dates of the authorization?
What is the authorization number?
5. Does my policy require a referral from a physician? YES NO
Have I received the referral from my physician? YES NO
6. What are my in-network benefits?:
Do I have a deductible? YES NO
Are there separate deductibles for medical and mental health? YES NO
Has my deductible been met? YES NO If NO what amount is left to be fulfilled?
On what date does my deductible begin?
How many visits do I have per year?
Is this per calendar year or contract year?
How much/what percentage do I have to pay at the time of service (co-pay)?
Any other benefits or limits that I should know about?
Complete the following questions ONLY if your therapist is not in network:
7. Do I have to choose a mental health provider within my network? YES NO
If YES, contact SOPCC for a referral to a therapist in your network: 614-442-7650.
8. If NO, do I have out-of-network benefits? YES NO
If NO, contact SOPCC for a referral to a clinician that can work with you.
9. If YES, what are my out-of-network benefits?