



Out-of-Network Insurance Reimbursement

Family Integration Counseling Service, Inc. does accept and bill some insurance networks. However in many cases you may be eligible for reimbursement from your health insurance company through out-of-network reimbursement. For many clients, reimbursement rates are generally 50% of what you will pay. To be reimbursed, the following information will be helpful.

The following steps will be necessary to follow if you want to receive out-of-network reimbursement. Contact your insurance company (look on the back of your insurance card for the 800 number) and ask the following questions:

- Does my plan cover mental health counseling sessions?
- Does my plan cover only individual counseling or will it also cover family or couples counseling?
- How many sessions does my plan cover in a year? How many sessions do I have left?
- Does my plan cover services to out-of-network mental health providers?
- What is the deductible I have to meet before I'm eligible for reimbursement from out-of-network services?
- Is there a maximum amount per session the insurance will cover for an out-of-network provider?
- How much time do I have to file a claim for out-of-network services?
- Do I need pre-authorization or a referral from my medical doctor to see a counselor?
- If I need pre-authorization, do I need to call or does my counselor?
- What is the process to get reimbursed for out-of-network services?

Please be very clear about the last question. Each insurance company will have a slightly different process and it is essential to know what information your company will need and what form your company uses so that you can be given the proper documentation for your claim.

Most insurance companies will only reimburse you for services that occur after they authorized the services. You may be asked what services are needed by CPT Code. This is a numerical code that tells insurance what service you are participating in. The most commonly used codes are Psychological Intake-90791, 45 Minute Individual Therapy-90834, Full Hour Individual Therapy-90837, Family Therapy-90847, and Group Therapy-90853. Please request a faxed or mailed confirmation of your services so we can verify that the correct services were requested.

I will provide you with a detailed receipt (called a "superbill") after each session. It contains all the information that most insurance companies require. If your insurance company requires additional information or documents you may have these sent directly to FICS so we can supply the additional information. Once you have your documentation, you can provide it to the insurance company so that it will reimburse you for your payments.