

### Insurance Worksheet

Please complete this worksheet and **bring this completed worksheet with you to the first session**. This will help guide you through the insurance process to determine your benefits and whether an authorization/precertification is required to see me.

Call the Member Services / Customer Service number listed on the back of your insurance card. Sometimes, the card will specify a special number for "Mental Health." When you reach a customer service representative, tell them you are "inquiring about mental health, outpatient, office visit benefit information." Clarify that this is not for med management, but is for therapy office visits.

Ask these questions and record the answers below for your and my records.

Date you called: \_\_\_\_\_

Name of representative you spoke to: \_\_\_\_\_ (record operator ID# if applicable)

Ask if you have a deductible for outpatient mental health therapy office visits and, if so, what is the deductible amount? \_\_\_\_\_

Ask what the co-pay or co-insurance amount is that you are responsible to pay: \_\_\_\_\_

Ask what the total number of sessions allowed for this plan, per year: \_\_\_\_\_

Ask if the plan is based on a calendar or plan year: \_\_\_\_\_

Ask if there is a pre-existing waiting period, and if so, the length of this period: \_\_\_\_\_

Lastly, ask if an authorization or precertification is required: \_\_\_\_\_

If an authorization/precertification is required ask if they, personally, can give you that authorization (you may have to tell them my name and service location: **Steven D. Nichols, Ph.D. 3200 Linwood Avenue, Suite 2, Cincinnati, OH 45226 513-321-7900**). If they cannot give the authorization, ask what number you must call for authorization/precertification and call that number to get it. Record name of who you spoke with and the authorization/precertification confirmation number:

\_\_\_\_\_

How many sessions, and/or for what dates, is this authorization good for?: \_\_\_\_\_

Name of person you spoke with: \_\_\_\_\_