**STEPS FOR OBTAINING IN-NETWORK BENEFITS**

This document assists you in determining your benefits, encompassing deductibles, co-pay/co-insurance rates, and visit limitations. Dr. Riley is available for clarification if you have any questions.

Completing this form is optional, but it is essential to be aware of these fees in advance to avoid any unexpected expenses during the testing process for which you will be responsible.

1. Call the number listed on the back of your primary insurance card for “Mental Health Benefits” or “Behavioral Health Benefits”. If there is no separate number for either of these options, call the customer service number.
2. From the menu options, choose an option having to do with finding out ‘member benefits’.
3. Hold for the customer service representative and give them your insurance ID number and ask them the following questions:

|  |
| --- |
| I need to find out if Dr. Bree Riley (My NPI # is: 192 272 4640) is an in-network provider for my mental/behavioral health benefit plan? \_\_\_\_\_yes \_\_\_\_\_\_\_\_no  Then ask the following… |
| Are these all “**valid & billable codes**”? **Do these codes require preauthorization**?  90791? □ yes □no □ yes □no  96130/96131? □ yes □no □ yes □no  96132/96133? □ yes □no □ yes □no  96136/96137? □ yes □no □ yes □no  96138/96139? □ yes □no □ yes □no |
|  |
| What is my deductible? $\_\_\_\_\_\_\_\_\_\_\_\_ (Is there a separate family deductible vs. individual?)  If there is a deductible, does mental health fall under the deductible? □ yes □no  How much of the deductible have I met? $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| What is my co-insurance or co-pay amount for each mental health session? $\_\_\_\_\_\_\_\_\_ |
|  |