Questions to Ask Your Insurance Company

OUT-OF-NETWORK MENTAL HEALTH BENEFITS · Rachel Dehlan Therapy

Call the member services number on the back of your insurance card and say:

“I’m considering seeing an out-of-network Licensed Marriage and Family Therapist and would like to understand my reimbursement benefits.”

My therapist’s information

Provider: Rachel Dehlan, LMFT

License: California LMFT #119113

NPI: 1609917343

CPT codes: 90791 (first session) and 90834 (ongoing sessions)

Session fees: $200 (first session) and $175 (ongoing sessions)

Could you please answer the following?

1. Do I have out-of-network outpatient mental health benefits?
2. What is my out-of-network deductible?
3. How much of my deductible have I met?
4. What percentage of the allowed amount does my plan reimburse?
5. What is the allowed amount for CPT codes 90791 and 90834?
6. Does my plan cover services provided by an out-of-network California LMFT?
7. Is telehealth covered?
8. Are there session limits or annual maximums?
9. Is prior authorization or a referral required?
10. Can I submit a superbill for reimbursement?
11. How long does reimbursement typically take?

Finally

Can you provide a **reference number** for this benefits verification call and send me **written confirmation** of my out-of-network mental health benefits?

Please note: clients are responsible for verifying their own benefits and submitting for reimbursement. A superbill does not guarantee reimbursement; your insurer makes the final determination.