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## INSURANCE INFORMATION

The billing department requests that you make contact with your insurance company to ask about your benefits. Even though your insurance card may state that you are with an insurance company that is contracted with me, your outpatient mental health benefits may be processed and paid by a different insurance company that I am **not** contracted with.

When calling your insurance company you should ask the following questions using the term “outpatient mental health benefits”. If you are here for issues related to alcohol or drug use, please inquire about your “outpatient chemical dependency benefits” as well as your mental health benefits.

- 1) Is the provider I will be seeing in or out of network? If the provider is out of network are there any outpatient mental health benefits?**  
This could mean the difference in how much you will have to pay out of pocket. For an in network provider, the client usually has to pay less out of pocket than they would for an out of network provider. Sometimes an out of network provider will have no outpatient mental health coverage.
- 2) Do I have a deductible? If I do, how much is it and how much has been met?**  
A deductible is the amount that you must pay each year before the insurance company will start to pay on your claims. Typically, your deductible resets every calendar year but check with your insurance company to be sure that is the case with your benefits. Your insurance company will not pay any claims until the deductible is met. Rather, you will pay until you have satisfied the full amount of your deductible.
- 3) Do I have a copay and/or coinsurance?**  
A copay is a set amount and a coinsurance is a percentage of the amount **that the provider bills your insurance company for services**. It may be that you have a copay, coinsurance, or both.
- 4) Do I need prior authorization, and if yes, how do I go about getting this authorization?**  
Some insurance companies will not pay if authorization is not arranged before the appointment.
- 5) If I am having testing done what do I need to ask?**  
Testing is called “outpatient mental health testing” and, if needed, the CPT code used is 96101.

I UNDERSTAND THAT IT IS MY RESPONSIBIILLITY TO PAY FOR ANTHING MY INSURANCE COMPANY DOES NOT PAY. I AM AWARE THAT A QUOTE OF BENEFITS FROM MY INSURANCE COMPANY IS NOT A GUARANTEE OF PAYMENT. I AM ALSO AWARE THAT IF MY INSRUANCE COMPANY MISQUOTES TO THE BILLING DEPARTMENT OR ME, THE BILL IS ULTIMATELY MY RESPONSIBILITY.