

Behavioral Health Insurance Worksheet

Check the back of your insurance card--your insurance benefits for mental/behavioral health may differ from your medical coverage. Also, your carrier may outsource mental/behavioral health coverage to a separate company. (Example: you may have Blue Cross Blue Shield of TX for medical, but Aetna for behavioral health. Our providers are in-network with BCBSTX, but out-of-network with Aetna).

When you call, this is the information you should make note of and keep for your records. Different plans vary widely, even among the same company.

NOTE: You may want to also print out the "Insurance Terminology" document, to refer to when you call.

From my insurance card:

Name of Insurance Company: _____

Phone number: _____

Policy #: _____ Group #: _____

Claims address: _____

When I call:

Date of call: _____ Name of representative: _____

Very important:

Are my behavioral/mental health benefits covered through the same company as my medical benefits?

YES or NO (circle one)

If "no," is my Pondworks provider in-network with the behavioral health insurance company?

YES or NO (circle one)

If my provider is in network, here is some info about my policy:

Effective date: _____ Calendar year OR Contract year policy (circle one)

% of the allowable that my policy will cover: _____ Co-pay: _____

Do I have a deductible? YES or NO (circle one)

If YES, how much \$? Individual: \$ _____ Family: \$ _____

How much of my deductible have I already met for the year?:

Individual: \$ _____ Family: \$ _____

Is there an out of pocket maximum \$ amount? YES or NO (circle one)

If YES, how much \$? Individual: \$ _____ Family: \$ _____

How much of my out of pocket maximum have I already met for the year?:

Individual: \$ _____ Family: \$ _____

Is there a visit limit? YES or NO (circle one)

If YES, how many visits will be covered this year? _____

Does my policy have a pre-existing condition clause? YES or NO (circle one)

If YES, does it have an expiration date? _____

Do I need to obtain authorization for my visits? YES or NO (circle one)

If YES, may I set that up now?

Can I get additional authorizations if I need them?

Are my benefits any different if my diagnosis is considered an SMI (serious mental illness)?

YES or NO (circle one) If YES, how?

Other Notes:
