



## How to Check Your Out-of-Network Mental Health Benefits

This quick guide can help you understand your out-of-network benefits for therapy and psychiatric services before scheduling.

### Step 1: Call Your Insurance Provider

Use the member services number on the back of your insurance card or log in to your online insurance portal.

### Step 2: Ask These Questions

- Do I have out-of-network mental health benefits?
- What is my out-of-network deductible and reimbursement rate?
- Are therapy and psychiatric visits covered out of network?
- Is prior authorization required?
- Are CPT codes 90791, 90834/90837, and 99213–99215 covered?

### Step 3: Know What to Expect

Out-of-network services are typically paid in full at the time of your visit. You may submit a superbill to your insurance for possible reimbursement.

*Coverage and reimbursement vary by plan. This guide is for informational purposes only and does not guarantee insurance reimbursement.*