Therapy Changes
Focused guidance when you need it most.

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Step 3: Understand Your Mental Health Benefits

'In-network' and 'Out-of-network' benefits

In-network providers are contracted with your insurance provider. At Therapy Changes, we do our best to schedule you with a therapist who is 'in-network' with your insurance provider. Occasionally we match you with a therapist who is not listed with your insurance. **Out-of-network** providers are not contracted with your insurance company. Some insurance plans include out-of-network benefits and even have greater flexibility than your in-network benefits.

Deductibles, Copays and Co-Insurance

A **Deductible** is an amount that you owe before your insurance plan begins to pay. For example, if you have a deductible of $1,500, you'll pay 100% of your bills until the amount you pay reaches that amount. How much you pay for the service provided varies based on your mental health insurance company.

Co-Insurance and **Copays** are how much you pay *after* your deductible has been satisfied. Your **Copay** is a fixed amount that you pay at each session. **Co-Insurance** is a calculated percentage that you are responsible for paying per session. For example, if your co-insurance is 30%, once you meet your $1,500 deductible; insurance will cover 30% of the total bill.

To learn more about your benefits…

To seek help understanding your mental health benefits, you can read your policy, if you have access to it, or if you are insured through your employer, you may be able to seek help from the Human Resources Department or a Benefits Specialist. If you do not have access to these resources, simply call the **'Member Services'** number on the back of your card.

The Top 5 Questions to ask Your Mental Health Carrier:

1. Am I covered for outpatient mental health services?
2. Do I have a deductible?
    a. If 'yes', how much of my deductible has been met?
3. What is my responsibility per session?
4. Are there any exceptions or limitations to my benefits? (Ex: number of sessions, referral or authorization required, type of therapy, diagnoses, etc.)
5. Do I have out-of-network mental health insurance benefits?
    a. If 'yes', what are they?