

What will your insurance pay for psychological services? Remember you are responsible for payment

Please call your insurance company using the phone number on your insurance card and ask the following questions:

1. Name of insurance covering mental health benefits _____
2. Name of customer service rep _____
3. Date of your phone call _____
4. Is **Catherine MacLennan PhD NPI 1750476032** in-network? _____.
5. Since Catherine MacLennan is out of network, what limitations apply for therapy or assessment services? _____
6. Do I have a deductible for outpatient non-facility mental health? _____.
 - a. Have I met it? _____
 - b. if not, how far do I have to go? _____
 - c. have I met my max out of pocket? _____
7. What is the billing address for my claims?

8. Is there a special form that you require me to sign and submit?
9. Will you be sending Dr MacLennan any special paperwork?
10. I would like to confirm that reimbursement will be remitted to myself/the insured, as either I or my provider will submit the claims for my services or my child's services. When my provider submits claims on my behalf, she selects "no" on box 27 indicating that reimbursement should come directly to me. Is there anything else I need to do to ensure consistent direct reimbursement to myself/the insured from claims submitted?
11. **What is the reference number for this call?** _____ . **Date** _____

Individual therapy questions

1. Do I have a copayment for the following therapy codes: 90791, 90837, 90834, 90832, 90846, 90847?
2. If my deductible applies, do I have a coinsurance percentage after the deductible is met? _____
3. Does outpatient counseling need to be pre-authorized? _____
What is my authorization number? _____
How many sessions are being authorized at this time _____
6. Do I have a limit to the number of sessions I am allowed per benefit year? _____
7. When does the benefit year roll over? _____
8. Are my mental health therapy sessions combined with other treatment services across the year like OT, PT, chiropractic, etc? _____ If yes, how does my plan allow me to see my mental health provider under the mental health parity law?
9. Are 60-minute (90837) sessions covered?

10. Are telehealth sessions covered? _____ Does Dr MacLennan need to do anything special for this coverage? _____. Are there restrictions on telehealth? _____. Are there special benefits because of the pandemic? _____ Do I need preauthorization for telehealth sessions? _____

Couple and family therapy questions

1. Is couple therapy covered by my policy? _____.
What diagnostic and billing codes are allowed? _____.
2. Is family therapy covered by my policy? _____.
What diagnostic and billing codes are allowed? _____

Assessment and testing questions:

1. Do I have a copay for the following assessment codes: 90791, 96132, 96133, 96136, 96137? _____.
2. If my deductible applies, do I have a coinsurance percentage after the deductible is met? _____
3. Does psychological or neuropsychological assessment and testing need to be pre-authorized? _____
4. Do you need a referral from my or my child's primary care provider to authorize psychological testing or neuropsychological testing? _____
5. How many hours are being authorized? _____
6. Is there a maximum number of hours being authorized for testing?
7. Is a pre-authorization form required? If yes, please send it to Dr MacLennan.

Be sure you have the reference number and date for your phone call.

Please give Dr MacLennan this document

Dr MacLennan's information:

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