

## **Questions to Ask Your Insurance Provider Concerning Mental Health Benefits**

Do I have behavioral or mental health coverage?

Do I need to have a referral from my Primary Care Physician?

Do I need to have pre-authorization from the insurance company?

Am I only authorized to see a particular kind of therapist? (Psychiatrist, Psychologist, Licensed Mental Health Counselor, Licensed Marriage and Family Therapist, Licensed Clinical Social Worker, etc.)?

Am I limited to a certain number of sessions of therapy (per fiscal year, calendar year)?

What is the effective date of insurance coverage?

Am I limited to a dollar amount per year (\$500, \$250) that will be covered?

What is my deductible and co-pay after insurance adjustment is applied?

If I am authorized to see one therapist and that does not work out, do I need to get authorization for a different therapist?