

Patient Insurance Worksheet

Please attempt to contact your insurance company prior to beginning treatment. This sheet will direct you to the questions to ask.

Refer to your medical card or talk to your HR Department to get the following information:

Insurance Company _____

Phone # (for Mental Health or Behavioral Health) _____

Have the following information ready to provide:

Patient	Insured
Name	Name
Social Security #	Social Security #
Birth date	Birth date
Relationship to Insured: Self Spouse Child	Employer
	Group #
	ID #

Ask the following question when you call:

“I would like information about my behavioral health benefits. This is for OUTPATIENT treatment.”

Checklist

Date of Contact	
How many sessions do you allow?	
Do I have a deductible?	
Do I have a co-pay	
Do you require a network provider? Yes No	Is Patricia Stryd one of your Providers? Yes No
Do sessions need to be pre-certified? Yes No	Certification #
To what address should claims be sent?	

Note: Many companies also offer their employees an EAP (Employee Assistance Program) benefit. This benefit is separate from your regular insurance, although it MAY be managed by the same company as your regular insurance. There are usually a set number of sessions allowed per calendar year (usually 3-8) and there is no co-pay. There are also fewer restrictions on how these sessions can be used. If you do have an EAP benefit, you may want to use it before you use your mental (also called behavioral) health benefits. You can find out about your EAP benefit from the Human Resource Department where you work.

Do you have an EAP Benefit? Yes No