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Individual, Family and Group Psychotherapy for Children, Adolescents and Adults

OBTAINING AUTHORIZATION & DETERMINING MENTAL HEALTH BENEFITS/COVERAGE

Obtaining Authorization for Sessions

If you plan to use your insurance I recommend that you **call** your managed care or insurance company **before your first appointment** to determine if you need an authorization for mental health services (and to obtain an authorization if you need one). The following are important questions to ask:

1. How many sessions have been authorized? _____
2. What is my authorization number? _____
3. What is the maximum number of sessions I can use per year? _____

I will verify your benefits and authorization. In order to help me do this please provide the following information:

4. The number you called: _____
5. The name of the person you spoke with: _____
6. The date you called: _____

Checking your insurance coverage: mental health benefits

I also recommend that you check your mental health benefits so you know how much you will have to pay at each session. When checking your benefits, be sure to obtain your mental health benefits as these often differ from you medical benefits. The following are important questions to ask:

7. Co-pay/coinsurance for each session: _____
8. Deductible? _____
 - a. Has it been met? Y___ N___
 - b. Amount met to date: _____
9. Number called for benefits if different than above: _____

It is your responsibility to find out if you need an authorization for mental health services. Sessions that have not been authorized will not be covered by your insurance and you will have to pay the full fee for these sessions.

PLEASE COMPLETE THIS SHEET AND BRING IT AND A COPY OF YOUR INSURANCE CARD TO THE FIRST SESSION.

I do not bill secondary insurances.

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