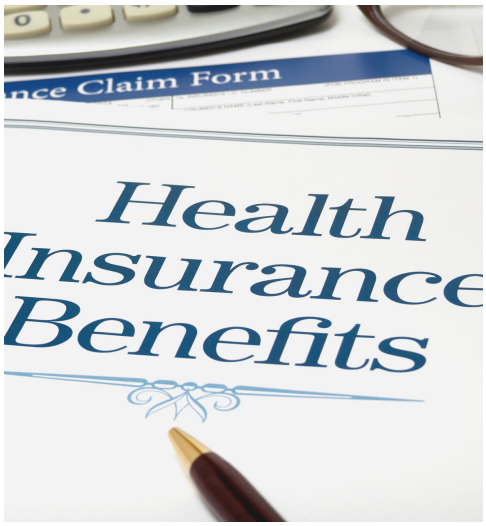
# GUIDE TO OUT-OF-NETWORK BENEFITS FOR COUNSELING SERVICES

PROVIDED BY AMP SMART BUSINESS

*Small Town Counseling partners with AMP Smart Business for all medical/mental health billing services and inquiries. If you are a current client, please contact AMP Smart Business for any billing needs.




## What to Consider

You have decided to seek counseling services for either you or your child, but are unsure of where to begin.

No worries. We developed this guide to help you become more informed about

- fees and services
- insurance options and
- and what to expect from Small Town Counseling

Here are a few things to consider as you move forward.

1

### KNOW YOUR INSURANCE LINGO

When speaking to your insurance provider about counseling services, know they may refer to these services as *mental health services*, *behavioral health services,* or *psychotherapy*. Counseling services with Small Town Counseling are also considered ***outpatient services,*** as they are not provided during a prolonged stay in a facility.

2

### IN-NETWORK VS. OUT-OF-NETWORK PROVIDERS

You have the option to choose either an in-network provider or out-of-network provider.

**In-Network providers** have a negotiated a rate with your health insurance provider and as a result, can be more affordable with less upfront costs. Most commonly, you are responsible for a ***co-pay or co-insurance*** at the time of service. You are also, however, responsible for meeting any ***deductibles*** that may be required by your individual health plan. To better understand your health plan benefits, contact your insurance and ***consider asking*** the below questions:

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1. Does my health insurance plan cover counseling services?
2. Do I have a  deductible?
3. How much is my deductible per calendar year?
4. If I have a deductible, how close am I to meeting it?
5. What costs can I expect to be responsible for both before and after my deductible is met?
6. Please provide me with a list of in-network providers whom I can contact.

**Out-of-Network providers** are not contracted with your health insurance provider and set their own rates and fees for services.  When you see an out-of-network provider, you are responsible for the full fee of the session/service. However, if you have out-of-network coverage, you can request a ***Superbill*** from your provider that you are then responsible for submitting to your health insurance provider for a portion of or full reimbursement. Your therapist may also offer a ***Courtesy Bill*** instead of a superbill, which means they will bill your health insurance provider directly and upon receiving the Explanation of Benefits (***EOB***), charge any remaining balances owed to the credit card on file.

For more information on your ***out-of-network coverage*** contact your health insurance provider and ***consider asking*** the below questions:

1. Does my health insurance plan provide coverage for out-of-network providers?
2. Do I have a deductible? If so, what is it and have I met it yet?
3. What costs can I expect to be responsible for both before and after my deductible is met?
4. Does my health insurance plan include behavioral health benefits?
5. If so, what does that process look like and what is the process for submitting a superbill/claim?
6. Does my plan limit how many sessions per calendar year I can have? If so, what is the limit?

*Note: Due to COVID-19, all counseling services from Small Town Counseling will be delivered via **Telehealth services** and through the use of a secure video platform. Be sure to ask your insurance provider specifically about reimbursement of telehealth mental health services.

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## 3 REASONS PEOPLE SEEK OUT-OF-NETWORK PROVIDERS

- You're looking for a therapist with a ***specific expertise or specialty*** when working with a particular population.
- You have a ***high deductible plan for in-network*** coverage, thus will be paying for sessions in full even with an in-network provider.
- You chose a plan with out-of-network coverage because you prefer to have a ***larger selection of providers*** .
- You have excellent out-of-network coverage and after personally submitting your claims, will be paying little out of pocket.
- You connected with a specific therapist who is out-of-network.
- Your ***in-network provider is not accepting new clients*** or you did not hear back.
- And the NUMBER 1 reason why you may want an out-of-network provider, to ensure ***confidentiality*** of your services. It is important to know that while insurance can lower your cost, insurances typically require a clinical diagnosis. This diagnosis becomes a part of your permanent medical record.

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## PAYMENT & BILLING AT SMALL TOWN COUNSELING

FOR COUNSELING SERVICES FOR YOU OR YOUR CHILD

1

**Private Pay**
We charge the card on file for all services.

2

**Private Pay + Superbills**
We charge the card on file for all services and provide you with monthly Superbills. Superbills are provided to you through the Client Portal once per month by the 15th of the following month (i.e. April superbills will be provided by May 15th).

You are then responsible for contacting your insurance to inquire about reimbursement.

3

**Bill Your Insurance**
If we are an in-network provider your insurance, we will bill your insurance for services.

*It is important you contact your insurance to confirm eligibility for coverage and inquire about co-pays and deductibles, as you are responsible for any nonpayment by your insurance.

*A valid debit/credit or HSA/FSA card is securely placed on file for all billing options.

You are responsible for contacting your insurance to confirm eligibility. You are responsible for all co-pays, deductibles, late cancel & missed appointment fees, and nonpayment by inurance.