

Understanding Your **MENTAL HEALTH INSURANCE**

When you're dealing with a mental health crisis and you need help quickly, having to deal with insurance jargon can be confusing and intimidating. In this guide, you will find the basics of what you need to know to maneuver the mental health system on an outpatient basis.

GUIDE BY RESTORATIVE FAMILY SERVICES LLC

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KEY TERMS

DEDUCTIBLE

It refers to the amount you are responsible for before the insurance will pay any portion of your treatment. Also know that providers must charge you the allowed rate for that insurance plan, not the out-of-pocket rate. *Ask your insurance plan what the allowed rate is to be sure this is followed.

CO-INSURANCE

It refers to you be responsible for a percentage of the cost of your care. This amount can change based on what service you are provided and the cost of service.

CO-PAYMENT

It refers to a flat rate you are responsible for any time you receive a service. Unlike the co-insurance, the rate remains the same independent of what services you receive.

OUT OF NETWORK BENEFITS

This term refers to benefits your insurance plan pays for services provided by professionals who do not have a contract with them. These benefits are usually more expensive than in-network benefits.

KEY TERMS

IN-NETWORK BENEFITS

This term refers to benefits and lower rates negotiated with providers who are contracted with your plan. These benefits usually offer you cost savings when receiving services from an in-network provider. The provider agrees to accept a slightly lower rate to be listed on the insurance plan's network.

MAX OUT OF POCKET

This term refers to the maximum amount you will spend in cost-sharing.

EXCLUSIONS

This term refers to any diagnosis or conditions that are not covered in your plan.

EAP BENEFITS

This term is an acronym for Employee Assistance Benefits.

This allows you a certain number of sessions that your employer has agreed to pay. The benefit of using this is that you do not have cost-sharing. There is no co-payment or coinsurance accepted.

What if...

YOUR THERAPIST DOESN'T ACCEPT YOUR INSURANCE?

You have several options:

- You can pay out of pocket.
- Ask the therapist if they offer a sliding scale.
- Utilize Health Savings Account.
- Use EAP benefits if available.
- Contact Insurance plan and ask if there are Out of Network Benefits.
- Ask for your insurance to set up a Single Case Agreement with the Provider. Must prove that other providers are unavailable.

Looking for Help?

RFS ensures that we take extra care to make mental health accessible and affordable. [Visit our website](#) today to request a call from our Admin Team.

You do not have to do this alone.