

Questions for determining out of network coverage

If you have more than one insurance plan, the primary insurance is the plan to which you are the subscriber. Claims must be submitted to this plan first. Then, a rejection from the primary insurance is submitted to the secondary plan. Make sure that you get information from all plans, and establish which plan is primary for you. We only submit claims to the first insurance only.

Call your insurance company. It is important to **verify benefits**. Make sure **you note the date and time of your call, as well as the Rep with whom you speak**.

OUT Of Network Questions: Ask the following questions:

- Can I see any psychologist I want, or must I go in the network? (If you must go in network, find out if the plan is managed by Aetna Behavioral health).
- The initial evaluation is 90791 and the charge is \$250.
- Individual Psychotherapy (90834) (38 to 45 minutes face to face) \$200
- Individual Psychotherapy (90837) (53 to 60 minutes face to face) \$225
- Family therapy is 90847 and the charge is \$225 per session.
- Family therapy without patient present 90846 is \$200.00
- Am I permitted to have family psychotherapy or only individual psychotherapy **(don't say this is for marital or couples counseling)**.
- If you can see anyone, ask "what is my deductible?"
- Once the deductible is met, what percent does the ins co pay?
- **Is this payout based on Dr's fee, or some fee the ins company establishes?**
- **How much do you allow for each of the codes listed above?**
- Do you pay differing amounts whether my disorder is biologically based or not?
- Do I need precertification for my psychotherapy sessions?
- How do I get the pre-authorization?
- How many sessions have been approved? What is the authorization #?
- How many sessions are allowed each year?
- Finally, ask the billing address for claims, and the electronic payor ID # (not necessary if you have Aetna, Value Options or Medicare).

Once you have the answers to these questions, call us, so we can **establish an appointment time**. **Please note, payment must be made with check or cash. We do not accept credit cards.** Thank you.

Both Drs Tamara and Mark participate with all Aetna plans. Dr. Mark is accepting traditional Medicare (not the Medicare Advantage plans). Dr Tamara participates with Value Options.

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