

INSURANCE COVERAGE CHECKLIST

There will be an “800” number on the front or back of your insurance card. Call the number for behavioral or mental health. Please review the following questions with the customer service representative so that you can discuss these with Dr. Wellborn. This form can help you make notes on your phone call.

- Name of the Customer Service Representative or Case Manager (the person who answered your questions).

- Is James G. Wellborn, Ph.D. a provider for your insurance plan? Yes No
- If “no”, is there an out of network benefit policy that would cover visits by Dr. Wellborn? Yes No
(If the answer to both of these questions is “No”, you will be required to pay my full fee any time we meet. Please call me to discuss options if I am not a provider for your insurance.)
- What are your outpatient behavioral benefits? (These are different from physical health benefits.)
How many visits are covered in a year? _____
What is your out of pocket fee for each visit? _____
- Are there some diagnoses or behavioral services that are not covered? Please list: _____
- What is the case number or other identifying number for the client?
Number: _____
- Is a pre-certification of visits required before you can meet with Dr. Wellborn? Yes No
- Please ask for the initial Authorization Number _____
and the number of initial visits that have been authorized _____
- Is there a specific treatment plan form that Dr. Wellborn is required to use? *(If the answer is “Yes”, please have them fax the treatment plan form to Dr. Wellborn at 615-370-8768.)*
- What is the Claims Address? _____
(This address is usually NOT _____
the same address on the card.) _____