

# CINCINNATI CENTER *for* DBT

## Tips for Using Out-of-Network (OON) Benefits

If you have Out-of-Network benefits, these step-by-step instructions can help you get the information you need to submit a claim to your insurance company.

We recommend calling your insurance company for this information. You can find the number on the back of your insurance card.

1. Do I have out-of-network benefits?

Yes  No

If you answered no, this means you do not have out-of-network benefits. You do not need to continue as the rest will not apply. This means none of your fee will be covered by your insurance company.

2. Do my out-of-network benefits cover routine outpatient mental health services (also known as behavioral health)?

Yes  No

3. My therapist uses CPT codes. Can you tell me which of the following are covered? If prior authorization is required, please be sure to get details.

CPT Code	Covered	Not Covered	Requires Prior Auth
90791			
90837			
90834			
90832			
90853			
90849			
90839			

Details about prior authorization requirements:

126 Wellington Pl. Cincinnati, Ohio 45219  
Tel: 513-268-8306 Website: [www.cincinnati-centerfordbt.com](http://www.cincinnati-centerfordbt.com)  
Email: [info@cincinnati-centerfordbt.com](mailto:info@cincinnati-centerfordbt.com)

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4. Do I have a deductible? (a deductible is the amount you pay out of pocket before your insurance company will provide reimbursement)

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5. How much does my plan cover?

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6. Does this cover the full billed charges or the insurance company's allowable amount?

Full billed amount  Allowable Amount

7. Will Telehealth be covered if I use my out-of-network benefits?

Yes  No

Does my provider have to use a special Telehealth platform to obtain reimbursement?

Yes  No

Additional Notes:

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8. How do I submit the claim?

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9. Do I need a special form to submit along with my Superbill?

Yes  No

Space to copy the URL if available online:

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10. How will I be reimbursed?

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11. Can I get your name and a reference number for this call?

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Additional tips –

- Some insurance companies may try to encourage you to use an in-network provider before giving you information. Of course, you are welcome to find an in-network provider and they should be able to provide you with a list of current in-network providers.
- It is your right to use your out-of-network benefits. You should not have to provide details about why you want to use your OON benefits. Insurance companies must provide you with the details of your benefits and answer any questions you have and any questions on this form.
- It could be helpful to getting your claims processed/approved to provide some basic details about why you are seeking to work with us over another provider (eg, specific treatment modality or specialty of ours)
- If you feel the representative does not know how to help you or is withholding information from you, you can ask to speak with another representative.

Credit: Thanks to Sarah Lockhart-Palladino, LCSW, PC for sharing this document with the therapist community.