Insurance *Guide*

People First THERAPY GROUP

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PFTG is an **out-of-network** provider. We do not take insurance directly, but **you may still be eligible for reimbursement from your insurance company.**

How PFTG *works*

1. You have a session & pay your therapist's set fee
2. Therapist sends you a monthly Superbill
3. You send Superbill to your insurance to get reimbursed

With out-of-network providers, you pay the provider directly. Then, you submit your Superbill to your insurance company online to get full or partial reimbursement according to your plan's benefits.

Why PFTG does not *take insurance*

Autonomy over your care	You and your therapist decide your treatment plan together. Insurance companies often limit the number of sessions you can have based on your diagnostic code(s).
Potential lower cost overall	In-network insurance can often be misleading and ineffective. If you have a deductible and don't meet it, you are simply paying the fee out of pocket anyway. Even if you do meet the deductible, full (or even partial) reimbursement is not guaranteed. With out-of-network coverage, you will receive full or partial reimbursement for your services once you hit your deductible.
Privacy	Providers have to share your mental health diagnosis when billing insurance. Because we don't bill insurance, we can keep your mental health diagnoses private.
Reasonable rates & clear communication	PFTG therapists are able to offer fair rates for services (including subsidies and sliding scale where possible and appropriate) instead of a set rate dictated by insurance. You can expect clear and transparent communication about fees.

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Determining your potential *reimbursement*

Call the # on the back of your insurance card and ask these questions:

1 Deductibles

Do you have an in-network deductible for mental health?

If so, how much is it?

How much is already met?

Tells you how much more you have to spend towards your deductible until in-network services are covered.

Do you have an out-of-network deductible for mental health?

If so, how much is it?

How much is already met?

Tells you how much more you have to spend until your out-of-network services are covered.

2 Reimbursement %s and process

What % of reimbursement do you offer for out-of-network outpatient mental health services?

Tells you how much of your fee you will get back via reimbursement from your insurance company.

Does your policy require preauthorization or a referral on file for outpatient mental health services?

Do you require a special form to be filled out, in addition to a Superbill, to submit a claim?

Where do you submit Superbills/claims/reimbursement forms?

You may also be able to answer these questions by logging into your insurance portal online, searching for your Explanation of Benefits, and looking at the online Claims process.

Pricing

You and your therapist will discuss your fee prior to the Intake Session.

We accept credit cards, FSA/HSA cards, checks and cash.

We will email you a Superbill each month containing all necessary information to submit a claim following your insurance company's procedure.

Typical CPT (treatment) codes used:

90791 90834 90837 90846 90847

Our mission: high quality care *for all*

Our mission is to provide high quality therapy to all, regardless of ability to pay, while offering fair and sustainable wages to our therapists. Each therapist sets their own fees and offers sliding scale slots when available. PFTG offers a subsidy program for those who qualify and works with the Victims Compensation Assistance Program for survivors of physical and sexual violence in PA. Please notify your provider if you think you may qualify for any of these options.

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