

## **Risks Associated With Using Insurance For Payment**

Insurance reimbursement necessitates that a client be given a mental illness diagnosis. Most insurance plans do not cover any treatment not deemed 'medically necessary' (this means that at a minimum your symptoms must significantly impair your ability to function). I am on insurance panels in order to give you this option, but please be informed of the risks below so that you can make an informed decision.

Largely, insurance companies use a managed care company to manage their members' mental health benefits. Most managed care plans require a treatment plan be submitted after initial authorization for future sessions. This would require me to answer questions pertaining to your treatment and provide any additional information requested in order for more sessions to be approved. The approval of additional sessions would be given by a case manager not known to you or me. Effectively, an unknown person has access to your private information and is in charge of the course of your treatment.

Your diagnosis is then entered into the managed care companies confidential computer database. However, often your diagnosis and other pertinent information are fed into a national medical information database (MIB) that centralizes information for approximately 700 insurance companies. At the very least, it would be on record that you saw a therapist for some type of mental illness. This database information is accessed if you subsequently apply for any individual life, disability or health insurance during the next 7 years.

To receive insurance coverage, you signed a general release for the insurance company, so they can also obtain more detailed information from any previous insurance companies that paid for your treatment. Even a person with a legitimate diagnosis can be negatively influenced by this information, as it can influence whether or not the insurance company rejects the application or charges a higher rate. It is illegal to reject insurance based solely on MIB's report, but because of the red flags at MIB, additional information is easily obtained once you've signed a general release. (These general releases for medical records are usually found on applications for employment, background checks for employment, security clearances, seeing a new health care provider, adoptions, life, disability or health insurance applications. For \$9.00 you can obtain a copy of your record at MIB).

The FBI and other law enforcement officials can access your insurance information at any time. Make an informed decision if you decide to use insurance for mental health services. I understand that paying out of pocket can be expensive. Therefore, I will do my best to work with you on payment options and upfront payment discounts.