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QUESTIONS TO ASK YOUR INSURANCE COMPANY BEFORE YOUR SCHEDULED APPOINTMENT DATE:

Do I have Out of Network Mental Health benefits in my plan?

Do I have a deductible; if so, how much is it? _____ Can it be combined with my medical deductible in order to meet it? _____ How much of it have I met so far?

What is the percentage that my insurance pays and what is the percentage that is my co-pay? _____

How many visits are allowed per calendar year?

Do I need to be pre-certified or pre-authorized (call before being seen by a counselor)? If so, how many visits allowed before I have to call again?

What address does Lighthouse Christian Counseling need to use to send out-of-network Mental Health Claims? (complete street address, city, state, and zip).

What is my insurance company's Payor ID number for electronic claim submission by Lighthouse Christian Counseling?

Effective date of my policy: _____ Is
my policy on a calendar or anniversary year?

Do I have a pre-existing condition clause for counseling benefits that would delay my
eligibility for benefits?

PLEASE NOTE: The fee for your initial visit with Lighthouse Christian Counseling is required to be paid in full to your Counselor at the time of your visit. With submission of this form at that time, you may then begin using your insurance benefits with our Counselors for your subsequent visits.