

Background and Additional Considerations for Choosing a Community-Based Therapist

This document provides a detailed overview of the process for identifying a therapist. If useful, please consider taking notes or adapting this document as appropriate for your patient and family population.

Overview

Identifying and selecting a therapist in your community may feel overwhelming, particularly “when you really need to talk to someone now.” There are several important steps to understand. We hope this guide will help make the process a more positive experience and connect you with a great therapist closer to home.

Step 1

Contact your health insurance company to learn more about which outpatient therapy services are covered, and at what level. The contact phone number for your insurance company is likely on the back of your insurance card.

When calling, there are several questions to ask and understand:

- Is there a difference in how the mental health appointment is billed if the primary diagnosis attached to the service is medical (e.g., spina bifida, urinary incontinence, constipation) or behavioral/mental health (e.g., anxiety, depression)?
- It's possible your insurance company will have two different ways of billing a therapy appointment – one for medical diagnoses and one for primarily mental/behavioral health concerns (sometimes called a mental health “carve out”).
- If a therapist uses a medical diagnosis (physical problems for which you would also likely see a physician/primary care doctor), the visits will often be covered under the “medical” portion of the insurance plan.
- If the concern is primarily mental/behavioral health in nature (anxiety, depression, grief as examples), it is possible the insurance company will “carve out” these services and have a different set of rules and limitations.
 - You may be referred to a different company that has been chosen by your primary insurance to “handle” mental health coverage/billing.
 - Be sure to write down the name, phone number, and website for the company or group providing the mental/behavioral health portion of your insurance coverage.
 - You will want to contact them and ask them the same questions you asked of your health insurance company.
- Which therapy and/or assessment services are covered under my plan?
 - Individual therapy?



The Roadmap Project

- Family therapy (both with and/or without patient present)?
- Couples therapy?
- Group therapy?
- Assessment (testing)?
- Any other services?
- What is my co-pay for each visit?
- Are there additional co-insurance or other out-of-pocket expenses?
- What (if any) are the limitations on usage (for example, same day services are not covered if you have more than one visit)?
 - Number of visits allowed in a plan year?
- Do the caps/limits apply per diagnosis (10 visits a year for each time your child has a separate, new issue) or across diagnoses (10 visits a year total)?
- Is there a total visit limit or financial "lifetime" cap on covered services? If so, learn details.
 - Do the caps/limits apply per diagnosis or across diagnoses (for example, only 30 visits, regardless of reason/diagnosis, for the lifetime of the policy)?
- Where can I find a list of in-network providers in my area?
 - Website?
 - Printed list?
 - How often is this list updated?

Ask the questions above until you feel like you have a good understanding of how this portion of your medical insurance works. It's important to know these details and share them with your child's therapist so s/he can ensure his/her practice and billing stays within the parameters set by insurance (e.g., does your child always need to be present, or will parent-only visits be covered as well?).

A sample of how to begin this conversation:

My child has _____(medical/behavioral health diagnosis) and I am interested in learning which, if any, mental/behavioral health services will be covered under his/her medical insurance plan. If the service is billed under the medical diagnosis, which services will be covered? If it's a primarily mental health concern, is it covered in the same way, or are there differences? If so, what are they.

Congratulations! If you've made it this far, you now have a good understanding of how your insurance works for therapy services, and you hopefully have a list of potential therapists in hand - now let's figure out WHO! On to step two...

Step 2

Identify what type of clinician or therapist you would like to see.

There are many clinicians who may be able to be helpful to you and your family. While each has particular areas of training and expertise, ultimately, it's most important to pick someone with whom you connect and feel comfortable, rather than focusing on particular title or degree. The clinician would ideally be trained in and deliver treatments with the best support and evidence. Let's look at the professional labels:

- **Psychologists:** Doctoral-level care providers who have either a Ph.D. or Psy.D and are experts in psychology. Both degrees involve understanding behavioral health and emotional concerns and are specially trained in providing assessment and/or “talk” therapy. Many therapists use cognitive-behavioral therapy (CBT). CBT focuses on better understanding how our thoughts/feelings/beliefs impact how we see the world and how these beliefs impact our physical and emotional well-being as well as to find ways to make behavioral changes to improve functioning. Other treatment approaches may also be offered (it's important to ask about treatment approaches or “philosophy.”) Very few psychologists prescribe or manage medication (though often work closely with a prescribing psychiatrist).
- **Psychiatrists:** Medical doctors (M.D.) who have particular expertise in diagnosing and treating mental health and psychiatric concerns. They are able to prescribe and monitor medication. All are trained in psychotherapy (“talk” therapy.) Some participate in providing “talk” therapy, but it may not be their primary focus. If you are looking primarily for therapy, it will be important to clarify this when you call a psychiatrist's office.
- **Psychiatric Nurse Practitioners:** Psychiatric nurse practitioners are **Nurse Practitioners specially trained to work in the mental health field.** They assess patients, study their medical history, and perform comprehensive mental-health testing. Psychiatric nurse practitioners also make diagnoses and create treatment plans.
- **Social Workers:** Some social workers have specialized expertise in providing talk therapy (usually called a Licensed Clinical Social Worker - LCSW). Other social workers serve in roles helping families solve practical problems getting in the way of successful mental and physical health, as well as providing compassionate, supportive care.
- **Marriage and Family Therapists, Licensed Professional Counselors:** These mental health professionals have at least a master's degree in counseling, as well as extensive post-degree experience. These clinicians are also able to diagnose and work with mental and behavioral health concerns.

Step 3

Reach out to potential therapists – make the first appointment.

Review the list and identify potential therapists – then take the time to look at their websites or call several therapists. Ask questions to learn not only more about their practice, but also to get a general “feel” for if this person seems like someone with whom you (and your child) will be able to work comfortably.

Suggested questions include:

- Are you accepting new clients at this time?
- If no, this is a great time to ask if they have additional recommendations for whom you might call or email (they might not, but it can’t hurt to ask).
- If they say yes, proceed with the following questions.
- With what age groups do you typically work? Adults? Children? Couples? Families?
- Ensure that their PRIMARY focus is working with children and adolescents and/or families.
- What are your area(s) of particular interest/focus? What behavioral health concerns do you feel most comfortable treating?
- Notice the phrasing of this question – you’re asking them to tell you what they do best, not asking them if they can treat your particular concern.
- The hope is they mention your particular area of concern (e.g., anxiety, chronic illness) WITHOUT you having to mention it specifically.
- If they don’t mention your particular area of focus spontaneously, you can follow up with a second question:
 - Tell me about your experience in working with____(specific concern)?
(Ask this way so they aren't given the easy "yes/no" response option.)
- What is your typical wait time for an initial and/or follow-up appointment?
- Do you accept my insurance?
- If they say yes, confirm they will file paperwork for reimbursement.
- If they say no/private pay, are “fee for service” or they say they are “out of network” inquire how payment works.
 - All of these mean you will need to pay for the service after each session.
 - You will likely then be given documentation/receipt of payment, which you may submit to your insurance for out-of-network reimbursement (if this is an available option as part of your plan).
- What is your “fee-for-service” hourly rate?
- Will I be billed for other services (phone calls, emails, consultation with other therapists or care team members), and if so, how does this work and at what rate?
- What is your cancellation policy? Will I be billed for missed appointments?
- What is the latest I can call without being charged?



- Note: if you are using insurance, the therapist cannot bill a missed appointment, so clarify if you will be responsible for out-of-pocket costs for the missed appointment (likely, yes).
- If cost is a significant concern, you can also ask if the therapist offers a “sliding scale” fee option. Some therapists will adjust their hourly rate to make the service more affordable for families. This should not be used to simply “get a better rate” and is reserved for families who could not otherwise access therapy services.
- What type of payment do you accept (cash, check, credit card)?

While talking with each potential therapist, notice your initial reaction to each person. Notice if you feel comfortable talking and sharing information with them, if they seem interested and engaged in talking with you, and if they seem interesting in learning more about your child and your family.

While this will likely be a brief phone call (5-10 minutes, given most therapists’ tight schedules), you can typically tell quickly if you don’t “click” with someone. If that’s the case, move on.

If you feel it might be a good match, the final question:

- I would like to make an appointment to meet with you. When is your first available opening?
 - Confirm address and any unique characteristics about location.

Final thoughts...

Remember, most therapists (outside medical settings!) start on time and end on time, so be sure to leave enough time to get there before your planned start time.

Best of luck with this process! It’s challenging at times, but well worth the effort!

National Mental Health Crisis Support

- **U.S. Suicide & Crisis Lifeline**
Trained counselors are available 24/7 by calling or texting 988. Chat is also available online at www.suicidepreventionlifeline.org.
- **Crisis Text Line**
Trained volunteer crisis counselors. You can text HOME to 741-741 to be connected with a trained crisis counselor and receive free support via text message. www.crisistextline.org
- **The Trevor Project**
The Trevor Project provides 24/7 crisis support services to LGBTQ young people. Call 1-866-488-7386 or text START to 678678 |