

How to Use a Superbill for Individual Counseling (Out-of-Network Insurance)

Private-Pay Practice Notice

Our practice operates on a **private-pay basis** and does not bill insurance or participate in insurance networks. Payment is due at the time services are rendered.

If your insurance plan includes **out-of-network mental health benefits**, you may choose to submit a superbill for possible reimbursement.

What Is a Superbill?

A **superbill** is a detailed receipt that includes information insurance companies typically require when reviewing out-of-network claims. Submission of a superbill does **not guarantee reimbursement**.

How the Superbill Process Works

1. **Pay for your session** at the time of service
 2. **Request a superbill** after your session or as a monthly summary
 3. **Submit the superbill** to your insurance provider (online or by mail)
 4. **Insurance reviews the claim**
 5. **Reimbursement (if approved)** is sent directly to you
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Important Things to Know

- Reimbursement is determined solely by your insurance plan
 - Out-of-network deductibles often apply
 - Reimbursement rates vary by plan
 - A **mental health diagnosis may be required** by your insurer
 - Processing timelines vary by insurance company
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Questions to Ask Your Insurance Provider

- Do I have out-of-network mental health benefits?
 - What is my out-of-network deductible?
 - What percentage of the session fee is reimbursed?
 - Are there limits on the number of sessions?
 - How do I submit a superbill?
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Need Help?

While we cannot contact insurance companies on your behalf, we are happy to provide superbills and answer general questions about the process.

Submission of a superbill does not guarantee reimbursement. Insurance benefits and coverage decisions are determined solely by the insurance provider.