

CENTER FOR HEALTH SOLUTIONS, PLLC
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It is your responsibility to investigate your health insurance coverage for services.

Dr. Lisson is not a health insurance professional, so she cannot give you official information or advice about your health insurance benefits. Your coverage is a contract between you and your health insurance company. Healthcare professionals have no control over which services your insurance company will cover or how much you must pay out of pocket for services. If your insurance company applies payment for services to your deductible, this means that you must pay that amount directly to Dr. Lisson. Per contracts with insurance companies, Dr. Lisson cannot forgive that balance, as you have received credit for that amount on your deductible as having been paid out-of-pocket.

As stated in the **Fee & Payment policy/Financial contract**, Dr. Lisson requires that you pay the estimated amount in full at the time of service. After the claim is processed, the insurance company will process the exact amount that was applied to your deductible. If you still owe a balance, Dr. Lisson will send you a bill (or a refund if you overpaid). Unpaid bills are subject to collection service.

Please contact your insurance plan and inquire about your outpatient mental health benefits. You will need to ask the following questions:

1. Is Dr. Gail Lisson (Licensed Clinical Psychologist in North Carolina) considered an in-network provider for my insurance plan under my mental health benefits? **Also note: Some insurance companies use a separate company for mental health benefits. Ask whether this is the case with your policy and whether your clinician has to be in network with that company for services to be covered.**
2. Do I have a deductible, co-insurance, or copay due? If so, how much?
Please specify all the following service codes:
 - 90791 for psychodiagnostic evaluation in an **OFFICE** setting.
 - 96130 & 96136/96137 for psychological testing in an **OFFICE** setting.
3. Ask if a pre-authorization is necessary for any of the above services codes. If so, ask how you get pre-authorized. If there are specific forms,

please obtain the form and email or fax them yourself to Dr. Lisson (fax: 919-377-1420) or (email: drgaillisson@gmail.com).

After you speak to your insurance plan, please complete the following information:

I spoke with my insurance plan on: _____(date)

My copay/co-insurance amount is: _____

My deductible due is: _____

Does your deductible apply to billing codes 90791 and 96130/96136?

My insurance requires a pre-authorization for psychological testing (codes: 96130/96136/96137) prior to the first visit- **YES or NO (please circle)**