

## **A Sober Way Home will bill your Insurance**

**For a 10% processing fee, A Sober Way Home will bill your insurance provider. We will submit the billing documents to your insurance provider for a retrospective review.**

**Why should I entertain the idea of checking into A Sober Way Home instead of a facility that says they will take my insurance upfront?**

We're direct about our cost for treatment because we want to give you peace of mind. You will not need to worry about having your treatment interrupted or stopped due to insurance denying coverage, nor will you receive large bills following treatment. A Sober Way Home wants to create trust with their patients, and we believe it's crucial to be straightforward about the financial aspect of treatment.

### **Reasons why some people choose not to use insurance:**

- More privacy and increased confidentiality
- You will not have to wait for authorization for coverage.
- You can extend your treatment as needed, and you do not have to worry about insurance benefits running out before your treatment is complete
- Medical expenses may be tax deductible.

### **Does Insurance usually pay?**

We have found that insurance providers typically do not cover an entire treatment program. They may cover any range of treatment from a few dollars a day up to some percentage of coverage for 30-90 days. From our experience billing insurance companies, we have seen that patients receive some reimbursement. However, in our opinion, the amount insurance providers will reimburse is almost always less than satisfactory, no matter which treatment facility you are considering.

One of the most frequent statements we hear from callers is this:

**My insurance provider says, "I am covered for inpatient treatment for up to X amount of days in a calendar year or in a lifetime."**

Most insurance providers **do** quote a specific number of days per a specified time period. However, our experience has been that once a patient has completed 10 to 30 days, the insurance provider denies coverage and recommends a lower level of care for completion of treatment.

**Should you decide to call other treatment facilities that work with insurance, it is in your best interest to ask the following:**

- What would my financial responsibility be in the event insurance provider denies coverage before I complete treatment?

- What happens if I do not have the funds to pay the remaining costs? Will I be discharged from treatment?
- What is the full cost of treatment and are there any potential additional costs (Detox fees, physician fees, psychologist/psychiatrist fees, medications and specialty services)?

This will provide you with a more realistic understanding of what your cost of treatment would be if your insurance benefits are denied after admission.

We are happy to file a pre-certification to see what your insurance coverage may be. This is NOT a guarantee of what the insurance company will actually pay on.

If you have any further questions, please call our admissions office, thank you.