

# 6 reasons to see an out-of-network therapist

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Before taking a deep dive into the therapy world, I never would have considered looking outside of my insurance network to find a great therapist. I assumed it would be easier and less expensive to see an in-network therapist, but quickly learned that's often not the case. Depending on your insurance plan and location, looking for an in-network therapist can be a long and arduous process, and seeing an out-of-network therapist can be a great way to avoid many common insurance headaches.

If you're starting to look for a therapist and deciding if you want to look for a therapist in or out-of-network, here are some reasons you may want to consider not limiting your search by insurance.

## **1. You're looking for a therapist with a unique skill set**

While many therapists are qualified to treat common challenges such as anxiety or depression, if you are interested in working with a specialist to address a specific challenge, you should consider looking out-of-network. Private pay therapists often have niche practices, and if you come across a therapist whose skills speaks directly to your needs--perhaps needs you didn't even know to look for-- it's worth reaching out.

Picture your dream therapist. If you imagine a highly specialized approach, such as a bilingual or bicultural therapist, a therapist who is a true expert in a specific approach such as CBT, an eating disorder specialist, or a therapist who specializes in working with LGBTQ couples, consider looking outside of your insurance network.

## **2. You want highly personalized services**

If a therapist isn't constrained by only providing services they can bill to an insurance company, they are often able to spend more time and creativity crafting the perfect treatment plan for you. They can offer longer or more frequent sessions than insurance might cover, and also explore out-of-the-box solutions. For example, if you are struggling with eating challenges, an out-of-network therapist might go with you the grocery store or help you cook and eat healthful meals-- services an insurance-accepting therapist would not be able to bill for and likely wouldn't offer. This is also true of non-traditional approaches, such as bodywork and video therapy.

In addition, some psychiatrists offer both psychotherapy and medication management, which allows for a more comprehensive understanding of your mental health needs before prescribing. These services are often private pay, but they offer great convenience and highly coordinated care.

## **3. You have a high deductible plan or good out-of-network benefits**

A deductible is the amount you have to pay upfront before your insurance coverage kicks in. If you have a \$6000 deductible and you haven't had any other medical expenses yet in the year, you are responsible for paying up to \$6000 in therapy session fees out-of-pocket before your standard copay applies. On the other hand, if you have good out-of-network benefits, your insurance company may reimburse you as much as 80% of each session fee, depending on your plan and the therapist's rate. This means that in some situations, using your out-of-network benefits can actually be more affordable or comparable to your standard copay to see an in-network therapist.

#### **4. You don't wish to use insurance benefits**

If you are on your parent's insurance plan and are uncomfortable with them knowing you are seeing a therapist, you might consider paying out-of-pocket. Since this also means you can't use out-of-network benefits, session fees could get a little steep. Look for a therapist who offers a sliding scale-- if you have financial limitations and explain the situation, some therapists are able to offer reduced rates.

In addition, paying for therapy out-of-pocket offers greater privacy. In order for your insurance to pay for therapy sessions, therapists are required to provide the company information regarding your sessions, including a diagnostic code. If you don't want your insurance company to have access to any information about your mental health, consider out-of-network options.

#### **5. You don't want to wait to start therapy**

In cities such as Boston, San Francisco, New York, and Washington D.C., many therapists choose not to accept insurances, and those who do tend to be full. Especially for uncommon insurance plans, it can be very difficult to find a therapist who is in-network and accepting new clients. If you limit your search by insurance, you may have to spend months on a waitlist before seeing a therapist. Private pay therapists tend to have more availability and greater flexibility in scheduling new clients.

#### **6. You found a great match!**

At the end of the day, your relationship with your therapist is one of the most important aspects of the healing process. If you only consider in-network therapists, you might eliminate therapists who would be a really good fit for you and maybe help you feel better faster. Choosing an in-network therapist who doesn't make you feel comfortable or specialize in the areas you're struggling with solely because they're in-network is a waste of money. Prioritize the personality fit and you'll find a great match.

If you are working with a therapist you really like and your insurance company changes (you graduate school, you get off your parent's insurance, you switch jobs), don't panic! Depending on your insurance plan, it may still be affordable to see your therapist using out-of-network benefits.