Happy Minds Psychiatry PLLC	Mudassar Tariq, MD
Tax ID: 813989390	Tax ID: 813989390
Group/Billing NPI: 1629515648	Rendering NPI: 1588895825

If you will be using your insurance benefits to pay for your mental/behavioral health services, prior to your intake session with us, please call your insurance company to find out the answers to these questions and fill in the information below. Please send or bring this completed form to your intake session.

Note: If you do not complete this form to your intake session, you might be charged the full contracted insurance rate for each session until you complete this task. I encourage you to take the time to call the #800 on the back of your insurance card to confirm your Mental/Behavioral Health benefits.

1. My prin	nary insurar	ice is:					
a. HMO	b. PPO	c. POS	d. Medical	e. EAP	f. Other:		
2. My sec	ondary insu	rance is:					
			iq, MD (NPI 15888 or him to file my c	•	•	vider for th Yes	e insuranc No
4. My aut	horization r	iumber, if app	licable:				
5. My num	nber of appr	oved sessions	:				
6. These s	essions are	from valid froi	n to dates.				
7. My ded	uctible for r	ny mental hea	lth benefit is:				
8. I have r	net my ded	uctible for my	mental health ber	nefit:	Yes	No	
9. lf not, h	ow much of	f my deductibl	e have I met?:	\$	out of \$		
10. My de	ductible rer	iews on:					
11. My Co	pay amount %	t (e.g. for CPT	Code 90791 with [	Diagnosis Cod	e F41.1) is: \$		Or
12. If appl	icable, my c	oinsurance %a	age amount is:				
13. I have	added this i	nformation to	my insurance info	ormation on r	ny Client Portal	: Yes	No
IF OUT OF	NETWORK						
	•		ariq is not in-netw ed with services:	vork with my Yes	insurance, I agr No	ee to revie	w and sigr
14. How n	nuch does m	ny insurance b	enefit reimburse f	or out-of-net	work counseling	g sessions	)
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15. Where do I send my out-of-network claims to in order to be reimbursed for services that I have paid?