



# Emmaus Counseling Center

*"We are committed to 'walking with you' and helping you to find peace in your life."*

**Business Office:**

8290 165<sup>th</sup> Ave. NE  
Redmond, WA 98052

**Phone:** 425.869.2644

**Fax:** 425.867.0930

[www.emmauscounseling.net](http://www.emmauscounseling.net)

**Bellevue Branch**

2122 112th Ave. N., #B200  
Bellevue, WA 98004

**Bothell Annex**

17921 Bothell-Everett Hwy,  
#101  
Bothell, WA 98012

**Bothell on Main Street**

10116 Main Street  
Suites #201 & #202  
Bothell, WA 98011

**Bothell Riverside Branch**

10516 East Riverside Drive  
Bothell, WA 98011

**Issaquah Branch**

22510 SE 64th Place, #220  
Issaquah, WA 98027

**Kirkland Branch**

12220 113th Ave. NE, #210  
Kirkland, WA 98034

**Lynnwood Branch**

3730 Serene Way  
Lynnwood, WA 98087

**Redmond Annex Office**

8275 166th Ave. NE, #200  
Redmond, WA 98052

**Redmond Office**

8290 165th Ave NE  
Redmond, WA 98052

**Woodinville Branch**

17924 140th Ave. NE, #203  
Woodinville, WA 98072

## Insurance Quick Check List

Call the customer service phone number on the back of your insurance card, or access their customer portal website for your plan is ultimately decided by your insurance company, you'll want to know and understand your coverage prior to your first visit.

Per our contracts with insurance panels, Emmaus does collect allowed amounts for copays, coinsurance, and deductibles at the time of service, as applicable.

Taking a moment to understand your coverage before your visit will help eliminate any surprises when it comes to how your claims are processed. We look forward to working with you!

### Questions to Ask Your Insurance Provider Concerning Mental Health Benefits

- Does my plan have outpatient mental health coverage?
- Is it billed to a separate company than my medical coverage?
- Does my plan have a deductible? Does that deductible apply to mental health?
- How much of my deductible has been met, and how much do I have remaining?
- Do I have a copay or a coinsurance?

### Notes:

Mental Health Coverage: \_\_\_\_\_

Deductible/Amount remaining: \_\_\_\_\_

Copay/Coinsurance Amount: \_\_\_\_\_

Additional Notes: \_\_\_\_\_

### Common Insurance Definitions:

- **Copay:** A set amount that you pay at each visit.
- **Co-insurance:** Percentage you pay of your insurance company's allowed amount for services provided. This varies based on procedure.
- **Deductible:** Amount that you are financially responsible to pay out of pocket before your insurance company begins payment for your visits.