

APPOINTMENT FEES, PAYMENT OPTIONS, AND INSURANCE INFORMATION

FEES:

Psychotherapy Fees:

Initial Session and Follow-up Sessions (45 minutes) - \$165

Extended Session (75 minutes) - \$275

Couples Premarital & Marital Therapy - \$165 per 45 minute session / \$275 for 75 minute session

We accept cash, credit card, and debit card payments.

We DO NOT accept insurance at this time – please see information below pertaining to insurance.

Typical Fees for Assessments including Testing

Initial Diagnostic Evaluation (45 minute appointment) - \$165

Testing and Administration - \$660

Scoring, Interpretation, and Report Writing - \$660

Follow up and Recommendations (45 minute appointment) - \$165

Total - \$1650

Fees may be more or less for assessments depending on the types of psychological test instruments used; this can be discussed with person conducting the assessment.

PAYMENT OPTIONS:

There are several different options for payment:

- 1) Debit or Credit Card (\$5 fee is applied to cover credit transaction processing fees)
- 2) Cash
- 3) Automatic payments can be used after completing the **Ongoing Debit/Credit Card Authorization Form**

INSURANCE:

This clinician is an out-of-network provider and therefore does not accept insurance. However, most insurance companies will reimburse clients for 50-80% of the fee. In order to seek reimbursement for therapy services by your insurance company, please follow the below steps. As your therapist, I will also guide you

through this process and answer any questions you may have along the way. At the end of each session, if requested, I will provide you with a receipt to submit to your insurance company for direct reimbursement. This receipt includes all of the information necessary to file with your insurance.

Steps:

- A) Contact your Insurance Carrier
 - 1) Ask the insurance provider if you have coverage for outpatient mental health psychotherapy and related mental health benefits. For *evaluation*, the code is CPT Code 09791, and for *individual psychotherapy*, the code is CPT code 90834).
 - 2) Ask: Does a deductible need to be met, and has it been met?
 - 3) Ask: Is Pre-authorization required? If so, try to obtain this number before we meet in person.
 - 4) Ask: Is approval or a referral required by a medical provider?
 - 5) Ask: What is the amount of coverage for an out-of-network provider? This will likely be a percentage number.
 - 6) Ask: Is there a time limit for submission of claims?
 - 7) Ask: Where should my claims be mailed?

- B) Pay for each individual session out-of-pocket on the day the service is provided. You will accept reimbursement directly from your insurance company.

- C) Submit receipt form directly to insurance company

- D) Document by making copies and tracking your claims. Legally, all claims must be paid or denied within 30 days of submission.