

Patient Financial Agreement

(This notice is yours to keep)

Below are the maximum self-pay rates (if for some reason your insurance doesn't pay, these are the rates that you will be responsible for). You will be responsible for co-pays, co-insurance, or deductibles as directed by your insurer at the time of service.

SELF-PAY RATES

Psychiatric Evaluation (the first, hour-long appointment)....\$125

Medication Management (15-20")....\$60

Court testimony, including travel and wait time...\$175 an hour

Missed appointment (or cancelled with less than an hour's notice)...\$25

Late cancellation (less than 24 hours)....waived the first time, \$25 subsequent times

Returned checks....\$25

Extensive paperwork (taking longer than 15" to complete, for school, disability)....\$25

Patient / Parent Responsibilities regarding billing:

- Please remember that you have final responsibility for paying for appointments. As a courtesy, we will work with your insurance to verify what they will or will not pay for. We will make reasonable efforts to collect from the insurance company, but if they do not pay within 45 days of the visit, you will be considered responsible for the payment.
- **You are ultimately responsible to know what your insurance covers and what services it has authorized.** Insurance benefits and claims is a complicated business; we will be happy to help you understand. You should ask your insurance the following:
 - Is there a separate company that handles the mental health part (some insurances "sublet" the mental health benefit to a different company)
 - Are mental health services covered? (Some insurance plans won't pay for mental health, or they won't pay for one year). Does the plan cover nurse practitioners? (some out-of-state plans don't)
 - Is there a pre-existing condition clause? If so, how long does it last? Will the insurance pay for medication even if they don't pay for the visits?

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- Is there a limit on how many mental health visits they will pay for in a year? If so, you will need to keep track of the number of visits you have used, especially if you are also seeing a therapist or attending a group therapy.

- Is authorization for medication management required? Usually, this needs to be obtained before the appointment. We can help you get the authorization, **if you notify us at least an hour before the appointment that authorization is required.** Companies often will not back-date an authorization, and you will be responsible for the entire cost of the visit if you don't inform us before the appointment that authorization is needed.

- If you have a change of insurance, please notify us in advance of your appointment and fax us a copy of your card if you can. If you inform us of the new insurance when your appointment is scheduled to begin, we may not be able to verify your benefits immediately, and you may be asked to reschedule or pay the full fee above. This is especially important if you have a late afternoon appointment; some insurance companies close before we do.

- Sometimes, an insurance company will contact you for more information. Insurances often request proof that a young adult is a dependent/ full-time student, and will not pay for anything until you provide them with proof. Some insurances ask you to complete a form about past treatment you may have had. **You must send them the information quickly.** Some insurances will refuse to pay the claim if you do not send them the requested info within two weeks.

- Delinquent accounts are subject to referral to collection agencies and interest at a rate of 10% per annum will apply for balances over 60 days old.

(This policy written December 2009)

- This policy has been explained to me, and I agree to it.

Printed name _____ Signature _____ date _____