

Tidelands Counseling

ABOUT FEES AND INSURANCE

Fees

The fee for **Mat Chirman**, Licensed Marriage & Family Therapist and Licensed Professional Clinical Counselor is \$120.00/session. The fee for **Kim Richards and Colleen Ryan**, Licensed Marriage and Family Therapists is \$120.00/session. Marriage and Family Therapist Intern **Elise Thompson** is \$95/session. Our fee for Marriage and Family Therapist Interns **Kassandra Boortz** and **Jon Wise** is \$75/session. The amount that your insurance company may reimburse you for these services is determined on a case by case basis by the insurance company when you submit a superbill. See below for more information.

How Insurance Works

In-Network Providers: Some Marriage and Family Therapists (MFT's) sign contracts with insurance companies to provide services and are reimbursed by insurance companies at a fixed rate. These contracted therapists are called "In-Network Providers". Insurance companies prefer that you use In-Network Providers. The contracted reimbursement rates are typically much lower than the rates most MFT's charge for services. For example, most MFT's charge somewhere around \$120 for a session. Insurance companies will reimburse In-Network Providers typically in the range of \$55 to \$80 for a session. About \$68 is average.

Mat Chirman is an In-Network Provider for many insurance companies **through December 31, 2015**. From January 1, 2016 onward Mat Chirman will no longer be In-Network with major national insurance companies such as Anthem Blue Cross, Blue Shield, Aetna, etc. Mat Chirman, Kim Richards and Colleen Ryan are **In-Network Providers for Victim Witness Compensation**. Mat Chirman and Kim Richards are **In-Network Providers for CenCal/MediCal through either The Holman Group or San Luis Obispo County Behavioral Health**.

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Out-of-Network Providers: Many insurance companies will also reimburse if you receive services from an **Out-of-Network** or **Non-Contracted Provider**. This reimbursement works differently as there is no contracted reimbursement rate. Insurance companies will typically reimburse either a set amount (for example, \$45/session, no matter the cost of the session) or a percentage of the session cost (for example, 50% of the amount billed). You are then responsible for paying the difference between what the therapist charges (\$100/session, for example), and what the insurance company reimburses (for example, 50%, or \$50). At Tidelands we require that you pay the full fee at the time of service and then submit a Superbill for reimbursement (see below).

Some insurance companies **will not reimburse** Out-of-Network Providers at all in an effort to control their costs. In this case you are responsible for the full session cost.

Kim Richards, Colleen Ryan, Elise Thompson, Kassandra Boortz and Jon Wise are **Out-of-Network or Non-Contracted Providers** for all national insurance companies (Anthem Blue Cross, Blue Shield, Aetna, Magellan, etc.).

Billing Insurance

If you receive services from us as an **Out-of-Network Provider** we can provide you with what is called a **Superbill**. A **Superbill** is simply a bill for the services you have received and paid for that has all of the information that an insurance company will need to consider reimbursing you for those services. You will need to contact your insurance company to find out how to submit a **Superbill** for reimbursement. Procedures may differ by insurance company.

Please notify your therapist at your first session if you would like us to prepare Superbills for you. Typically we complete Superbills on a monthly basis, but at your advance request we can give them to you more frequently.

What You Should Know

You are responsible for understanding your insurance benefits and what will and will not be covered. Some questions you should

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ask your insurance provider before starting therapy are as follows:

Do I have mental health benefits?

Are my mental health benefits limited to certain mental illnesses or problems?

How much does my plan pay for a Licensed Marriage and Family Therapist who is an Out-of-Network Provider?

What is my deductible for an Out-of-Network Provider and has it been met?

How many sessions per calendar year does my plan cover?

Is a referral required from my primary care physician?

Is a "prior authorization code" or other approval required before I start therapy?

Other Important Information

Insurance **will not pay** for missed or late-cancel sessions. In these cases, you will be responsible for the full session fee. A minimum of 24 hours notice of cancellation is required.

If your insurance company requests a report in order to process your claim, you are responsible for payment for the report writing service. We will notify you of this requirement in advance of writing and billing for the report.

Questions?

If you have any questions about insurance or how our billing works, please make sure to ask us at your first appointment!

Sliding Scale Fees

Our goal is to provide sliding scale fees to as many clients with limited income as possible. To that end we have a limited number of sliding scale appointments available both for individual therapy and group therapy. If you are unable to pay our standard fee please discuss this with your therapist during your initial session. We will make every attempt to make therapy affordable for you. We accept cash, checks and credit cards.