

**SERVICES "NOT COVERED" BY INSURANCE**

Insurers typically pay only for services which are delivered face to face with clients in the office, and our contracts with these insurance companies request we notify clients in advance of any "non-covered" services. In addition to the information provided to you on the informed consent for therapy services form, this list below is intended to provide further detail about the types of services which your insurance provider typically will not cover or pay for.

**TYPICAL SERVICES NOT COVERED OR PAID FOR**

- Co-payment amounts, which vary for each insurance policy and plan.
- Care that was denied by an insurance company
- Telephone consultation (whether with the patient, family members, or other providers) \$100 per hour.
- Email correspondence. \$25 per Email.
- The writing of letters at the client's request to various persons or agencies. \$75 per hour.
- Case management (e.g., calling treatment facilities or schools to arrange referral, contacts with social service agencies, (DCYF, the Diversion program, etc.) \$75 per hour.
- Review or preparation of reports of assessment or treatment. \$75 per hour.
- Photocopying and releasing records for any purpose other than necessary treatment. 25 cents per page.

**OUR POLICY**

In the course of treatment, almost every client needs some services that fall in these categories. In general, if it requires less than five minutes of time, the services are not usually billed to you as a courtesy. However, if they are frequent, or if they exceed five minutes, you will receive an invoice due upon receipt. If you are concerned that you may be billed for such a service, please ask at the time that you request the service. Also, please ask your provider if you have more general questions about this policy.

**ACKNOWLEDGEMENT**

I have read and understand that my insurance does not pay for the types of services outlined above.

Name \_\_\_\_\_ Date \_\_\_\_\_