

Fee Policy

Fees are an important issue to anyone receiving professional services. This policy is to clarify our fees. This policy is not applicable to current Medicaid enrollees.

THERAPY FEES:

(90791) Initial Intake Assessment- 50 minutes- 70 minutes	\$ 150.00
(90837) Individual Therapy- 53-60 minutes	\$ 120.00
(90834) Individual Therapy- 38-52 minutes	\$ 85.00
(90832) Individual Therapy- 16-37 minutes	\$ 60.00
(90853) Group Psychotherapy	\$ 40.00
(90785) Interactive Complexity (Alternative Communication)	\$ 5.00

TESTING FEES:

(96130) Psychological Testing (1st hour)	\$ 125.00
(96131) Psychological Testing (additional hour)	\$ 100.00/unit
(96132) Neuropsychological Testing (1st hour)	\$ 140.00
(96133) Neuropsychological Testing (additional hour)	\$ 110.00/unit
(96136) Psych/Neuro Test Administration (1st half-hour)	\$ 50.00
(96137) Psych/Neuro Test Administration(additional half-hr)	\$ 50.00

*Insurance companies vary on Psychological Testing coverage. Please check with your insurance company.

CHARGES NOT COVERED BY INSURANCE:

IQ Testing	\$ 350.00
Achievement Testing	\$ 400.00
Early Kindergarten	\$ 400.00
Talent Development Evaluation	\$ 400.00-600.00
Phone Sessions/Consultations (over 10 min)	\$ 120.00 (pro-rated)
Letters/Reports	\$ 120.00 (pro-rated)
Records Requests	\$ 25.00
Legal/Court related fees (preparation, transportation, testimony)	\$ 300.00 per hour
Urgent Requests	\$ 50.00
Materials Fee	\$ 100.00

MISSED APPOINTMENTS: If you are unable to keep your appointment, we require 24 hours notice. If enough notice is not given and you have commercial insurance, we may charge you a \$100 no-show fee. If you miss your appointment and we do not hear from you, we may cancel any future appointments.

PAYMENT METHOD: All payment, deductibles, and co-payments are expected at the time services are rendered. Payment may be made by check, cash, or charge. We will not bill a 3rd party such as a parent or spouse, they may however prepay for sessions, if that is more convenient than paying each session.

INSURANCE: If you have insurance coverage, our office will assist you in filing for reimbursement. If you have insurance with a managed care company, you are responsible for obtaining authorization for the initial assessment. If we have not received authorization ahead of time, you will need to pay the full fee and will be provided with a refund if your insurance company makes payment. All co-payments are expected at the time services are rendered. Please note that we file insurance as a courtesy to you and that you, not your insurance company, are ultimately responsible for your bill. You are responsible for informing us of any changes in your insurance and/or demographic information.

PAST DUE ACCOUNTS: If an account is past due by 60 days, unless arrangements have been made, the account will be sent for collection and/or small claims court, and you will be responsible for any additional collection agency fees, attorney fees, court costs, and other expenses incurred in the collection of the account.

I have read the above fee policy and I may obtain a copy for my records. I understand the policy and by my signature below, I agree to be bound by the terms of this policy. Any and all negotiated exceptions or special arrangements are listed below.

I authorize payment of benefits to QC Psychology, for services provided and I authorize QC Psychology to release to my insurance company any medical information necessary to process this claim and/or to obtain authorization for treatment.

Print Name: _____

Signed: _____ Date: _____