

JACKIE BAY RN, MA, LPC

PROFESSIONAL PSYCHOTHERAPY

303-546-0792

FEES AND INSURANCE AGREEMENT

FEES

Individual psychotherapy \$70-\$95 (Sliding Scale Available)

Couples counseling (60-90 minutes) \$95-\$140

Consultations (55-90 minutes) \$95-140

Off session phone call, first 15 minutes no charge, after first 15 minutes \$25.00 plus \$1.65/minute

Professional Supervision (55 minutes) \$95

Letter or Report writing \$1.25 per minute

Professional Collaboration on your behalf (with your written permission only) \$1.75/min.

PAYMENT

Payment may be in the form of cash, check, major credit card, or using "PayPal" online. Payment is due at the time service is rendered. Reduced fee services are available on a *limited basis* and are assessed based on financial need. Let me know if you have questions or needs beyond the fee configurations posted above.

INSURANCE

My services can be billed as an out-of-network provider for most private health insurance programs. You are responsible to pay all fees at the time of service. I am happy to send you the appropriate paperwork to submit to your insurance company so they can reimburse you.

To determine if you have mental health coverage, the first thing you should do is call your insurance carrier and ask for "a quote of mental health benefits." Generally your insurance card will have a phone number that is specific for mental health benefits. Some mental health diagnoses pay from your medical, rather than mental health, benefits. When you reach a representative ask the following questions:

What are my mental health benefits?

Does my diagnosis qualify for medical benefits?

What is the coverage amount per session?

What is my co-pay amount?

How many therapy sessions does my plan cover?

What is my deductible for mental health before I am able to use my benefit?

How much does my policy pay for an in-network provider? An out-of-network provider?

What is the protocol for accessing my mental health benefit?

Do I need a referral from my primary care physician?

Do I need to talk to a case manager with the insurance company to be "authorized" to receive services?
How do I submit a claim?
Are there any special claim forms needed to submit a claim?

Missed Appointment & Cancellation Policy

As with every relationship, communication and respect for each others time and schedule are cornerstones for positive interactions. Coming regularly and on time are important aspects of maintaining a good relationship. Making an appointment means you have asked me to set my time aside for you. With that in mind, if you do not show up for your scheduled appointment and/or have not cancelled your appointment at least 24 hours in advance you will be required to pay the full cost of the session.

Medicaid or Medicare

I do not accept either Medicaid or Medicare.

Collecting Fees & Confidentiality

On occasions where financial default has occurred, I reserve the right to retain legal means and/or a collection agency to resolve fee discrepancies. In these cases, your confidentiality is not protected. Unless you provide written notice prohibiting these types of action and/or we come to other arrangements **before services are provided**, then it will be presumed that you have given me permission to act using the afore stated methods. Payment of fees after 30 days will incur a \$10/month late fee compounded monthly. Collections procedures will be initiated after 60 days, at your expense.

Questions? Please contact me for further information. 303-546-0792 or JackieBay@CounselingAndPatientAdvocacy.com

I understand the above noted fee structure and standards. I understand appointments not canceled within 24 hours will be billed in full. I understand that if financial default has occurred, I waive my right to confidentiality and will be financially responsible for all costs incurred to resolve fee discrepancies. I agree to make payment at the time service is rendered and as per the above fee structure.

Name (Print)

Signature

Date

Address

Phone Number(s)

I N T E N T I O N I N N O V A T I O N I N T E G R I T Y

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