

# **Billing Procedures for Couples**

Cover Page and Acknowledgement

<u>Each person receiving services must have this form on file before treatment begins.</u>

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<ul> <li>I have read the "Billing Procedures for Couples" info</li> <li>I understand that my diagnosis might not be covere counselor will not "manipulate" a diagnosis for the p</li> <li>I understand that I am responsible for charges incur</li> <li>I understand I am responsible for copayments and o</li> <li>I understand the cost for a "couples" session is \$20 partners.</li> <li>I understand that my partner's file will be establishe my own, and that I do not have the right to access reconsent on file.</li> <li>I understand that, should my partner and counselor would be germane to my clinical issues and well-be noted in my file accordingly, coded, and billed approximately in the second that if I have any questions about this counselor to explain these terms and conditions to a Any questions I have about the information herein herein herein</li> </ul>	ed by my insurance plan, and that my burpose of billing or third party payment. The red not covered by my plan. It deductibles.  4, which will be divided between the end and maintained as a separate file from my partner's file without appropriate entalk about me when I am not present, it sing, and as such, the session will be opriately. I can ask my professional me.
Client Signature	Date
Counselor's Name	
Counselor's Signature	Date

## **Billing Procedures for Couples**

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Before you begin clinical services, it is important for you to understand the aspects of the billing process that are unique to couples. If you are coming in for help with your marriage or another family relationship, please be aware that our ability to bill your insurance company likely cannot be determined until after we have met with you. We cannot guarantee at the time you schedule your appointment that your session will be "billable" to your insurance company, and we cannot manipulate a diagnosis for the purpose of third party payment. You must read through this information carefully and decide the best fit for your situation.

#### Step 1. Decide which of these situations is the best match to your own.

- A. No one has a clinical diagnosis, nor do we expect any of us will have a clinical diagnosis. If you and your partner or family member are at odds and in need of help with communication, boundaries, and general parenting and partnering issues, it is very likely that your insurance company will not pay for services. We certainly can submit to insurance, but the "diagnosis" would likely be a "V-code", which indicates that you are having problems with your personal relationships. Many couples and families in this circumstance skip the billing process altogether, and instead opt to be "Self Pay Clients." Use our "Insurance Declaration Form" to communicate with your insurance company and find out if your plan covers "V61.10," "V61.20," or other V codes. Regardless of how the session is billed, each person will have his or her own unique file, which is a privileged and protected document.
- B. One person has a pre-existing clinical diagnosis. This might be the case if there is a pre-existing condition, either previously diagnosed or expected to be diagnosed. If this diagnosis is interfering with your relationship, and seeing a therapist together will help the identified patient to ease the symptoms of the condition, then the family member is there to support the identified client, but the <u>file will belong ONLY to the identified "client"</u> and all the notes will pertain to the wellness and healing of that identified person. We cannot determine the legitimacy of a clinical diagnosis until after we have met. Common issues that have a detrimental impact on relationships might include anxiety, depression, substance abuse or dependency, or compulsive disorders. If only one person is the subject of clinical attention, then the focus will be that person, and individual therapy will likely be recommended
- C. Each family member has a clinical diagnosis. If each person has a pre-existing or suspected mental/behavioral diagnosis, then each is considered separately to be a "patient." If this is the case, then each person must have an individual intake appointment in order to properly identify and diagnose the condition and discuss treatment options that may or may not involve family members. If the diagnosed conditions and treatment goals warrant family sessions, then each person will be billed and separate clinical notes will be taken for the participating family members who were involved and were the subject of clinical attention. Family members will only have legal access to his or her own file, and not to the files of other family members.

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### Step Two. Decide to be Self-Pay Clients or Insurance Clients

One of the required intake forms that must be on file before services can begin is called the "Insurance Declaration Form." It explains in detail your legal right to decline insurance billing and opt instead to be "self-pay clients." Here is some additional information about billing and fees when your intention is to be seen together (as a couple or family), depending on which of the above categories fits your situation.

- A. **No one has a clinical diagnosis, nor do we expect either of us will have a clinical diagnosis.** Please check with your insurance company to verify what they will pay. Ask specifically about codes "V61.10" and "V61.20." It is our experience that many insurance plans will not pay for V-code services. The out-of-pocket charge for a couple's session is \$204. We have therapists who will slide this fee in the case of economic hardship. To be considered for a sliding scale, please see the Fee Reduction Application, found elsewhere on the website.
- B. **One person has a clinical diagnosis.** Sessions will last 30-40 minutes. The focus of clinical attention will be the treatment and progress of the identified patient. The charge for the session will be \$110 when the patient is seen with family present. If the patient is seen alone, standard contract rates apply. We cannot guarantee a diagnosis will be "billable" to your insurance company and we cannot manipulate a diagnosis for the purpose of billing a third party.
- C. Both family members have a clinical diagnosis. The session will last 60 minutes, typically dividing that time so that each person's diagnosed condition is the subject of treatment for 30 minutes. Sessions can only be billed to a third party if the diagnosed condition and treatment warranted the presence of the family member. A clinical note will be recorded for each person, clients will be billed separately, and each person will be responsible for his or her own copay and deductible amounts. We cannot guarantee a diagnosis will be "billable" to your insurance company and we cannot manipulate a diagnosis for the purpose of billing a third party.

#### Step 3. Complete the Insurance Declaration Worksheet

Our professional counselors can answer your questions, but ultimately it is up to you and your family to decide if you want to bill your insurance company and take responsibility for whatever your insurance company will not cover. Payment is required at the time of service for self-pay clients. Credit card information is required for clients billing through insurance companies, and credit cards on file will be charged balances due. Please see the Insurance Declaration Form for more information.