

Fees and Appointment Information

Most health insurance plans provide some form of coverage for psychological services. Determination of coverage is best obtained with a phone call to your insurance company. There are two forms of coverage: In-network and Out-of-Network. In-network benefits cover some psychological services with clinicians who sign contracts with the insurance company to provide services at a set rate. With these benefits, the insurance company oversees treatment, authorizing the number of sessions allowed for a particular condition. Depending on your plan, your total number of sessions may be limited within a calendar year. Out-of-network benefits cover psychological services with a clinician of your choice. Most plans require the patient to pay a deductible, and then reimburse a certain percentage of the fee after that, typically 60 or 80%. Some of these plans limit the number of sessions or the dollar amount that are reimbursable each year. The psychological services are not managed and authorization is not required.

Dr. Golin participates as **In-Network** provider for Medicare. He is **Out-of-Network** for all other **Insurance Plans**. Fee information and payment arrangements are discussed at the initial evaluation. Ultimately, the patient is responsible for all payment regardless of insurance reimbursement.

To ensure patient confidentiality and decisions about treatment such as frequency (if more than one session per week is needed) or duration (for how long you remain in therapy), out-of-network benefits or out-of-pocket payment is best. Insurance companies require regular treatment plans to be submitted by their network providers in order to continue authorizing sessions. Some patients feel uncomfortable sharing any personal information with anyone other than their clinician to whom they have entrusted their confidentiality. Financially, on occasion, there could be a miscommunication or error on part of the insurance company which may result in a reduced or lack of coverage leaving the patient with large unexpected bills. For better control over **YOUR** treatment and **YOUR** confidentiality, you may wish to consider out-of-network benefits or out-of-pocket payment. Regardless of what method you choose, assistance is provided with obtaining reimbursement from insurance companies.

An initial evaluation is \$175. Fees for individual therapy range from \$125 to \$150 for a 45 minute session. Couples and family therapy sessions will range from \$150 to \$175. Fee rates will be determined based on a sliding scale. All fees will be collected after each session. Based on your preference, either Dr. Golin or you can submit the bill to the insurance company. Cancelled initial evaluation and individual therapy sessions without at least 24 hours notice will result in a full session fee.

Please retain this copy for your information and files.