

Financial Policy

The following is a statement of the Financial Policy. Please read and sign prior to receiving any services. All clients must complete an intake form and provide any applicable insurance information prior to treatment. You will be given advanced notice of any fee increases.

PAYMENT IS DUE AT THE TIME OF SERVICE
WE ACCEPT CASH, CHECKS OR VISA/MASTERCARD
(Clients are responsible for credit card fees.)

Standard (non managed care) Insurance

Your insurance policy is a contract between you and your insurance company. Therapists are not a party to that contract. As a courtesy, your therapist will bill your insurance company and will require your insurance information. Depending on your deductible, you may need to pay for each session until the full deductible is met. Please check with your insurance company about your deductible and become aware of whether your insurance will cover the services provided.

Managed Care (Insurance plans for whom we are a participating provider)

All co-payments are due at the time of service. If your plan has a deductible, it is necessary to pay your balance in full until your deductible is met.

Please be aware that many managed care companies cover only a limited number of sessions and some require a physician referral prior to treatment and/or ongoing treatment reviews for authorization of additional sessions. In most cases, all visits to mental health professionals (including other providers and psychiatrists) count toward the allotted number of sessions. Please contact your insurance company for the specifics of your policy, as these will directly impact the extent to which our services are covered. In the event that your insurance coverage changes to a plan where we are not participating providers, the guidelines previously stated regarding standard insurance apply. In the event that your benefits run out or expire and you choose to continue therapy, you will need to negotiate a new plan for payment. Sliding scale fees are available. **All clients have ultimate responsibility for charges incurred during treatment, regardless of insurance status.**

Missed Appointments and Late Cancellations

If you cannot attend a scheduled appointment you will be expected to call 24 hours in advance to cancel. Any sessions missed or cancelled fewer than 24 hours in advance will be charged the regular session fee. Insurance and managed care companies do not cover missed appointments. Missed appointment fees are your responsibility. Please help us serve you by keeping scheduled appointments.

Kittie Rogers, LCSW : Anodyne Therapy, LLC
2100 East Broadway Suite 217B
Columbia Missouri, 65201
Phone: 573-529-0732 Fax: 573-875-3183

Past Due Accounts

Payment is expected at the time of service. If you are late on payments and have not made prior arrangements, a 3% late fee will be added to the amount owed and an invoice will be sent to you for payment. You will be expected to pay the balance of your account or call to set up a payment plan when you receive the invoice. If necessary, your account may be turned over to an agency for collection. Reasonable fees for collection, including collection agency fees or additional billing fees as well as court cost incurred for collection and billing will be your responsibility.

Fee for Services

The hourly fee is \$80 per session. (You may ask about whether you qualify for a sliding fee scale). In addition to weekly appointments we charge this amount for other professional services you may need. We will break down hourly costs of work for periods of less than a typical 45-50 minute hour. Other services include report writing, telephone conversations lasting longer than 5 minutes, consulting with other professionals with your permission, preparation of records or treatment summaries, and the time spent performing any other service you may request. If you become involved in legal proceedings that require our participation, you will be expected to pay for all of our professional time, including preparation and transportation costs even if we are called to testify by another party. Because of the difficulty of legal involvement, we typically charge \$150 per hour for preparation and attendance at any legal proceeding.

Clients who are Minors

The adult accompanying a minor and the parents (or guardians) of the minor are responsible for full payment.

Thank you for reading and understanding the financial policy for receiving services. Please feel free to contact us with any questions or concerns.

I have read the financial policy for Kittie Rogers, LCSW of Anodyne Therapy, LLC. I understand and agree to this financial policy.

Print Name

Signature of client or responsible party

Date

Witness

Date

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