

## ***INSURANCE INFORMATION***

Payment for therapy sessions can be made by check, cash, debit card, Health Savings Account Card, or – on a limited basis – via third party insurance reimbursement.

With the exception of the University of Utah Neuropsychiatric Institute Behavioral Health Network (UNI BHN), I am not a participating member of other Managed Care Preferred Provider Panels. However, many insurance policies allow for reimbursement for a Licensed Clinical Social Worker as an “out of network provider.” If your policy allows for that provision, I am available to work with you to secure such third party payment.

Some insurance companies are also amenable to providing reimbursement for my services on a case-by-case basis. By advocating with your insurance company that there is a particular reason why you want to receive therapy services from me – for example because of my experience in addressing a particular therapeutic issue, such as sexual abuse, dissociation, sexual identity issues, etc. – you may be able to secure third party reimbursement for my services.

If you are interested in learning more about working with your insurance company to secure out of network or special exception coverage, please mention this when you call to inquire about an appointment.

I am not a provider for Medicare or Medicaid service.

I do maintain a percentage of my caseload for sliding fee requests. If you need a reduced fee to access my therapy services, please mention this when you call to inquire about an appointment.

**Check Your Policy For Mental Health Coverage:** You can check your coverage by calling your insurance provider and asking the following questions:

- Do I have mental health benefits?
- What is my deductible and has it been met?  
(Be sure to check whether your policy has separate or combined deductibles for physical and mental health services.)
- Does my plan cover an out-of-network provider and would Jim be an approved out of network provider for my policy?
- How many sessions does my plan cover for each calendar year?
- What is my coverage per therapy session?
- Is pre-authorization required or is approval required from my primary care physician?

**Cafeteria Plan Reimbursements:** Reimbursement for mental health services can usually be submitted to cafeteria plans that may be available through your employment and through Health Savings Accounts. This may help to offset the cost of out-of-network reimbursement.

**Green Transportation Fee Reduction:** If you are a full-fee client who is paying out of pocket (vs. insurance reimbursement or reduced fee agreement) you may be eligible for a 10% reduction when you use bicycle or mass transportation as your method of travel to and from

appointments. Upon your request, I will be glad to discuss with you the criteria and procedures for applying for this benefit.

**Reduced Fee:** I maintain a limited number of reduced fee slots for clients who do not have coverage for third party reimbursement and who cannot otherwise afford to self-pay for therapy sessions. Requests for reduced fee should be discussed directly with Jim.