

# BYSTROM COUNSELING & CONSULTATION BILLING POLICY

## INSURANCE COVERAGE

To assist you in obtaining insurance payments, you must provide us with accurate health insurance information including:

- Name, address, and phone number of your insurance company.
- Group number and personal identification number.
- Name of policyholder and their date of birth.
- Relationship of the policyholder to the client.
- Copy of your insurance card, front and back.

We are in-network providers for most major insurance companies. As a courtesy to you, we work directly with your insurance and will make every effort possible to bill your insurance company.

- Once your appointment has been scheduled, we will verify your insurance benefit coverage and obtain any necessary authorization for you.
- Verification of benefit coverage **is not a guarantee of claim payment.** All benefits are subject to the terms and conditions outlined in your
- If you choose to not use your medical insurance, the responsible party will be expected to pay the full cost of services prior to each session.
- Account statements will be mailed monthly.
- **NSF Checks:** Bystrom Counseling and Consultation will assess your account for bank fees associated with any checks written with insufficient funds.
- **Unpaid account balances:** If your account balance is more than 90 days past due and arrangements for payment have not been agreed upon, Kenwood will forward your account to our collections agency to secure payment. If legal action becomes necessary, its costs will be included in the claim and you will be responsible to pay said fees. Kenwood reserves the right to withdraw care if a client or responsible party does not fulfill their financial obligations.

## Out of Network

In the event that we do not participate in your insurance plan's network, you may be eligible for out of network benefits. Please refer to your insurance provider's handbook or contact your insurance carrier to see if you are eligible for out

member contract with your insurance company. We have no authority to make representations to you regarding coverage of services.

- **It is your responsibility to understand the provisions of your health plan before your initial visit to know your plan's limitations, deductibles, and exclusions.**
  - It is your responsibility to pay any deductibles, co-payments, co-insurance, or other amounts your insurance carrier or third party payer determines as payable by you - **this is to be collected at each session.** If you are unable to pay at the time of service, please discuss this with your therapist.
  - **Insurance Changes:** It is your responsibility to provide us with updated information if your insurance carrier changes or your coverage terminates (this includes coverage by Medical Assistance, MNCare, U-Care or any other Minnesota State program). If a claim is denied due to inaccurate insurance information, you will be responsible for the amount denied by your carrier.
- of network benefits.

## Bystrom Counseling and Consultation Fees

- \$200/50 minute hour - Diagnostic Assessment
- \$150/50 minute hour - Individual Psychotherapy
- \$175/50 minute hour - Family Psychotherapy
- \$75 - No show or Late Cancellation Fee without 24 hour notice
- \$25/15 minute - Document Preparation/ Consultation Fee
- Non-sufficient Funds - Bank fees will be assessed to client account.

## LATE CANCELLATION OR FAILED APPOINTMENTS NOTICE

You, not your insurance company will be charged \$75.00 for any sessions you fail to attend or miss without 24 hour notice before the scheduled appointment.