

Financial Policy for Therapy Groups

We want to clarify billing procedures so you are aware of your financial obligations.

- 1) Your child is the client. Billing is submitted under the child's name.
- 2) Our office maintains a direct billing relationship with many, but not all, health insurance companies. We bill the companies listed below:
 - Aetna (most plans)
 - Blue Cross products (unless managed by a third party)
 - HMA
 - Lifewise
 - Managed Healthcare Northwest
 - Some ODS Health Plan (Managed Healthcare NW network; some require authorization)
 - PacifiCare (requires pre-authorization)
 - PacificSource (Managed Healthcare NW Network only)
 - Portland Public Schools Health and Welfare Trust
 - Providence Health Plans (requires pre-authorization)
 - Regence Blue Cross of Oregon
 - Teamsters Blue Cross
 - United HealthCare/United Behavioral Health
 - UMR
- 3) **It is important for families to educate themselves about the mental health benefits of their health insurance policies.** Please call your insurance company PRIOR to the beginning of any group to determine your coverage. Inquire if your company provides a managed mental health benefit, whether you must meet a deductible, the amount of your co-payment/coinsurance, and whether pre-authorization is required. In most cases pre-authorization is initiated by the family/patient and NOT the primary care physician/pediatrician. Coverage **may exclude** specific diagnoses e.g. Attention Deficit, Autism Spectrum, or a specific service such as group therapy.
- 4) Most groups include two different activities: Parent Meetings that are not billable to health insurance and Group Therapy Sessions that are insurance reimbursable. Therapy groups are a package. There is no credit for missed parent meetings or group therapy sessions. Please note: missed group sessions cannot be billed to your health insurance and the fee for that session is then owed by the family. The agreement with your insurance carrier is a contract between you, your insurance company and, in some cases, your employer. Please remember, billing insurance is not a guarantee of payment.

5) If we are billing your primary health insurance please complete the following:

- ✓ A Registration form
- ✓ An Information form
- ✓ A Consent for Payment and Healthcare Operations form
- ✓ A photocopy of your health insurance card

Registrations must include a \$250 deposit **AND** Credit Card Information. Incomplete registrations will not be accepted. If you must cancel prior to the first group session your deposit will be refunded minus a \$25 administrative fee.

Our policy is to bill a patient's primary insurance carrier and allow 60 days for the claim to be paid. If a payment has not been received from an insurance company within 60 days, we encourage the patient to contact their insurance company. Please review the Explanation of Benefits your insurance company provides. Accounts unpaid after 60 days are your responsibility.

6) If we are NOT contracted to bill your health insurance, please complete a registration form. **Payment in full** is due at the time of registration. Families using an out-of-network benefit should contact their insurance carrier **prior** to beginning a group. Verify your mental health benefits and whether pre-authorization or treatment planning is required. If an insurance company requires completion of paperwork in order for you to receive reimbursement, you must schedule an appointment with the clinician running the group prior to the first group session. This appointment is billed at a rate of \$150 for a 50-minute session. Please contact our Accounts Manager at (503) 452-0307 to obtain copies of the materials you will need to send a claim to your insurance company along with a guide for self-billing insurance. This information is available after the group has ended.

7) Financial arrangements between divorced parents must be handled independently of the Children's Program. In cases of divorce, the parent seeking service is responsible for the account and must sign the Consent for Payment and Healthcare Operations form. If the other parent holds the insurance, they, too, must sign the Consent for Payment and Healthcare Operations form. This gives us permission to bill the health insurance.

8) Payment can be made with a check, cash, MasterCard, Visa or Discover. Please make checks payable to the Children's Program. We cannot guarantee that your HSA, HRA or Benefits credit card will work in our office. Please call our Billing Office at (503) 452-0307 if you need a printout of your account or to answer any questions.

9) Accounts with unpaid balances after 90 days must be paid to avoid collection action. . We will make every attempt to contact you to settle the balance and reserve the right to use the credit card number on file to settle the balance.

10) In the event of non-payment of charges, the Children's Program shall be entitled to recover all costs and expenses incurred in seeking collection of such charges, including, without limitation, court costs and reasonable attorney's fees, whether such claims are

pursued through court proceedings, appellate or bankruptcy proceedings, arbitration, and/or mediation.