

The Benefits of Paying Privately For Therapy

As is the case with many highly experienced and qualified therapists, We not affiliated with many insurance or managed care panels, which means that our clients pay privately for our services. This policy allows you to receive several important advantages.

1. **Experience** -- Insurance panels are generally comprised of less experienced providers who are in the process of developing their practices and their skill. Since most insurance plans do not pay highly experienced therapists any more than those just beginning their career, the simple reality of business is that you tend to get what you pay for.
2. **Privacy**-- Insurance companies have numerous people examining your files at various stages: people who authorize payment, track your progress, audit psychotherapy practices, input data, print bills, and so on. Though all insurance companies claim to keep such information confidential, we have no control over what they do with it once it is in their hands By not involving your insurance company your private personal information stays in my office. I'm the only person who has access to it except under specific circumstances which are outlined in our office policies and discussed in our first session.
3. **Control**-- Insurance companies will often authorize only a certain limited number of sessions and can arbitrarily stop paying for sessions for a variety of reasons. Insurance companies make money by getting you out of therapy as soon as possible. You and the therapist decide on the type of service and time frame that best suits your needs, rather than the insurance company making those decisions
4. **Your Future**-- Your insurance provider requires you to receive a psychiatric diagnosis for your issue (e.g. major depressive disorder, generalized anxiety disorder, bi-polar disorder). If you wish to obtain private health or life insurance in the future, this information is open to review and can result in you and your family being denied coverage. Paying privately avoids this risk.

What About Out-Of-Network Benefits?

If you are eligible to utilize your out-of-network insurance benefits, I can provide a form in exchange for your payment which you can then submit to your insurance company to request reimbursement for some or all of the session fee. Some insurance companies allow clients to apply psychotherapy fees to their yearly out-of-pocket deductible. Also, some employers allow the use of flexible spending accounts, medical savings accounts, or health reimbursement arrangements.

How To Find Out More About These Options

To determine if you have out-of-network benefits, call the telephone number on the back of your insurance card. The customer service representative will be able to answer your questions. Be sure to ask what documentation they require in order to reimburse you.

To determine if you may utilize a flexible spending account, medical savings account, or health reimbursement arrangement to pay for therapy, call your employer's human resources or benefits department. Be sure to ask what procedures you must follow and what documentation they require in order to reimburse you.