



SERVICES “NOT COVERED” BY INSURERS

Insurers typically pay only for services which are delivered face to face with clients in the office and which are “medically necessary”, and our contracts with these insurance companies request that we notify clients in advance of any “non-covered” services. In addition to the information provided to you on the information and policy form, this list below is intended to provide further detail about the types of services which your insurance plan will typically not cover or pay for.

Typical “Not Covered” Services:

- Non-medically necessary services rendered after an authorization for care was denied by an insurance company
- Counseling for maintaining progress previously made in counseling, personal growth, improving couples relationships, or preventative services (services not oriented to immediate relief of symptoms)
- Marriage Counseling and career counseling
- Psychoeducational Testing, Achievement Testing, and Report Writing for School Systems, Courts, or other non-medical Institutions.
- School Consultation and Team conferences (e.g., school IEP meetings)
- Court ordered evaluations, subpoenas, court testimony
- Preparation of testimony for court, or letters to lawyers, judges, probation officers, etc.
- Telephone consultation (whether with patient, family members or other providers), including emergency calls.
- The writing of letters at client request to various persons or agencies
- Case management (e.g., calling treatment facilities or schools to obtain information or arrange referral, contacts with social service agencies (DCYF), etc.)
- Environmental intervention (e.g., reviewing an employee’s needs with an employer, at the employee’s request, or consulting with school districts)
- Prescription refills outside of regularly scheduled appointments
- Review or preparation of reports of assessment or treatment
- Photocopying and releasing medical records for any purpose other than medically necessary treatment for other medical or mental health providers.

Our Policy:

In the course of treatment, almost every client needs some services that fall in these categories. In general, if it requires less than five minutes of time, the services are not usually billed to you as a courtesy. However, if they are frequent, or if they exceed five minutes, charges will be billed to your account. If you are concerned that you may be billed for such a service, please ask at the time that you request or receive the service. Also, please ask your provider if you have more general questions about this policy.