Do you take my medical insurance?

We will gladly submit your claim to your insurance provider on your behalf. However, we are no longer contracted with individual insurance companies. While we are not "contracted" with insurance or managed care companies; that does not necessarily mean you cannot receive insurance reimbursement for some of our services. The details of your insurance policy determines if you can be reimbursed for "out of network" counseling, psychological testing, and psychiatry and under what terms. This will vary between insurance companies and specific policies, so you will need to determine the terms of your coverage with your insurance company.

We used to contract with insurance companies for a number of years but found it limited the quality and types of services we were able to provide. When a practice "contracts" with an insurance panel they are obligated to adhere to the standards set by the insurance company rather than having treatment be determined by what is best practice for that individual patient. We want the freedom to determine, along with the parents, what is best for the patient. Insurance companies dictate requirements including: which doctor or therapist can be seen, a formal diagnosis, sharing detailed personal patient information with third parties, limiting care to what is medically necessary, and allowing for only specific types of intervention. We believe adhering to these types of standards limits the effectiveness and the quality of care.

We want to be able to provide the amount of time per session we believe is necessary with the type of intervention we believe will be most beneficial to the patient. We want to be able to do sessions by phone, skype, or face to face. We do not want to be forced to always label the individual with a diagnosis if it is not clearly indicated. We also want to provide confidential care without it going through a clearing house, case manager, or other system that participates in global databases of patient information. In summary, we want to make sure our care is thorough, comprehensive, and best practice vs. limited to a specific time frame, type of intervention, or inappropriate diagnostic coding system.