WILSON COUNSELING, LLC

FINANCIAL INFORMATION AND FEE SCHEDULE

DATE: _____

CLIENT NAME: _____ GENDER: _____

CLIENT DATE OF BIRTH: _____ CLIENT SSN: _____

CLIENT ADDRESS: _____
Street City State Zip

PHONE: _____

EMAIL ADDRESS: _____

CREDIT CARD AUTHORIZATION (optional)

I HEREBY GIVE CONSENT FOR THE FOLLOWING CREDIT/DEBIT CARD TO BE MAINTAINED ON FILE FOR CHARGES INCURRED AT WILSON COUNSELING.

Name as it appears on Credit Card: _____

Credit Card #: _____

Security Code: _____ Expiration Date: _____ / _____ Billing Zip Code: _____

Welcome to Wilson Counseling. We appreciate the opportunity to help! All clinicians have a Master's degree in a Social Work or Clinical Counseling. LCSW/LPCC's have completed Board requirements and passed the full-level licensure exam for independent practice. CSW/LPCA's have passed a mid-level licensure exam and are under supervision and working toward independent licensure. All clinicians are required to complete continuing education. Many of our clinicians are certified in a specialty or have sought additional training in specialized areas to enhance degree of expertise and skill. This amount of education, practice under supervision, written examination, licensure, and continuing education provide you with a highly qualified mental health professional. Licensure boards maintain a high standard for practice, and clinicians are ethically bound to uphold these standards.

Mental Health or Substance Abuse Counseling

Initial Assessment	$175
Therapy session (52-60 minutes)	$150

Bowling Green Office:
1815 Destiny Lane, Suite C
Bowling Green, KY 42104

Russellville Office:
252 N. Main Street
Russellville, KY 42276

Voice: 270-904-1072

Fax: 270-904-1073

www.wilsoncounsellingllc.com

We are credentialed with most insurance companies and accept the negotiated rate of those companies. Your clinician must assign a diagnosis to be able to bill your insurance. Clinicians are assigned to clients with consideration of clinician's ability to bill your insurance company. Not all clinicians can bill all insurances, so it is important to **report insurance changes immediatel**y! Client/parent will be responsible for charges not covered by insurance. Insurance claims will be submitted to primary and secondary insurances in the order the insurance companies require. Copays and amounts applied to deductible are due at the time of service. A late charge of 5% per month will be added monthly for any amounts more than 30 days past due from the date of invoicing.

Private insurance limits clients to one hour of therapy per day. Sessions are 52-59 minutes. Time beyond 60 minutes will be billed to the client at $130.00 per hour, prorated in 10-minute increments. Self-pay and Medicaid clients can access extended time if the clinician's schedule allows.

Supplemental/Support Services NOT Covered by Insurance

Couples Counseling	$130.00/hour
Consultation/email/text/file review	$130.00/hour
DUI 20-hour Education Class[1]	$225.00
DUI Workbook (required)[1]	$ 25.00
BIP Assessment (1.5 hrs)[1]	$120.00
BIP Classes[1]	$ 25/each

Court

As an expert witness, significant preparation is necessary for court testimony or deposition. A subpoena compelling testimony is needed for records. A deposit of $400 (1 hour of preparation and 1 hour of testimony) is due once subpoena is received. If testimony of more than an hour is anticipated, an estimate will be provided. The party issuing the subpoena or requesting a report will be responsible for fees. For refund to be considered, 72 hours notice of court cancellation is required. Notification will be sent to the court for unpaid fees over 60 days. **These services are not covered by insurance.**

Court appearance-in person	$250.00/hour
Court preparation (1-hour minimum)	$150.00/hour
Court reports	$150.00/hour
Court travel	$150.00/hour

CANCELLATIONS OF LESS THAN 24 HOURS/NO-SHOW

Please be aware that demand for mental health services is high and if you are not able to keep your appointment, another client would benefit from this slot. Self-pay and private insurance clients will be charged a fee of $25.00 for any appointment cancelled in less than 24 hours and for no-shows. Fees are to be paid prior to next appointment. On the 2nd occurrence of last-minute cancellation or no-show, clients may be referred to another agency that can better accommodate their scheduling needs. **These fees are not covered by insurance.** Persons with Medicaid will not be charged this fee.

COMMUNICATION OUTSIDE OF SCHEDULED APPOINTMENTS

Reviewing and responding to text messages, emails or voice mails that are not for the purpose of scheduling appointments will be billed at $130.00 per hour, prorated in 5-minute increments. A minimum of 5 minutes will be charged for all communications outside of scheduled appointments.

Bowling Green Office:
1815 Destiny Lane, Suite C
Bowling Green, KY 42104

Russellville Office:
252 N. Main Street
Russellville, KY 42276

Voice: 270-904-1072

Fax: 270-904-1073

www.wilsoncounselingllc.com

Records

Clients are entitled to one free copy of medical records. Additional fulfillment of record requests beyond one free copy will be charged to the party making the request in 15-minute increments at **$130/hour. These fees are not covered by insurance. Please allow 10 days after making request.

I have read, understand, and agree to the above terms.

_____ _____

Client/Guardian Date

_____ _____

Client/Guardian Date

We appreciate the opportunity to serve you!!

Bowling Green Office:
1815 Destiny Lane, Suite C
Bowling Green, KY 42104

Russellville Office:
252 N. Main Street
Russellville, KY 42276

Voice: 270-904-1072

Fax: 270-904-1073

www.wilsoncounselingllc.com