



Financial Policy

Thank you for choosing us as your health care provider. We are committed to your treatment being successful. Please understand that payment of your bill is considered a part of your treatment. If you are uncertain of the cost for a specific service, we urge you to inquire with either the therapist or office manager.

Fees:

- Diagnostic Assessment (1st Session): \$175 / hour
- Individual, Family or Couples Counseling: \$175 / hour; \$115 / 45 minutes
- Miscellaneous Services: \$175 / hour, prorated
- A cash-rate fee can be arranged with the therapist

Self-pay clients must pay 100% at time of service.

Insurance clients must pay co-pays at time of service.

We accept cash, checks, Visa, MasterCard and Discover.

Insurance:

- You are financially responsible for your balance regardless of possible insurance reimbursement. If your therapist is a participating provider with your insurance plan, you are responsible for payment of all co-pays and deductibles at the time of each service.
- You are responsible to verify your insurance benefits. Any verification done by SECC is not a guarantee of coverage. Preauthorization/precertification is your responsibility. If your insurance company requires information from SECC, you must inform our business office.
- You must provide us with your complete insurance information. We will not bill your insurance if we do not receive complete and accurate information.
- Be aware that some, and perhaps all, of the services provided may not be covered services or may not be considered reasonable and necessary under your insurance plan. *Please check your benefits!*

Usual and Customary Rates:

Our practice is committed to providing the best treatment for our patients, and we do not charge over what is usual and customary for our area. You are responsible for payment regardless of any insurance company's arbitrary determination of usual and customary rates.

Minor Patients:

The parent or guardian signing the financial policy is responsible for the minor's account. SECC understands there are circumstances where another parent or guardian is responsible for all or a portion of the minor's medical expenses. However, SECC is not a party to that agreement. Any and all parties who are to be billed for a minor's account must sign a financial policy. For unaccompanied minors, nonemergency services will be denied unless charges have been pre-authorized to an approved plan or payment is sent with the minor.

Missed Appointments or Late Cancellations:

Our policy is to charge for "No Show" appointments at the rate of \$50 per office appointment. Appointments that are not canceled in advance are also subject to this fee. Please help us serve you better by keeping your scheduled appointments. Thank you for understanding our Financial Policy. Please let us know if you have questions or concerns.

I have read the Financial Policy. I understand and agree to the Financial Policy.

Signature of Patient or Responsible Party

Date

Patient Name Printed

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