

Sliding Scale Policy

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I am covered as an out of network provider with insurance plans. I require full payment at time of service and am happy to provide you with a receipt, which you can submit to your insurance provider, should you choose to use insurance to pay for your therapy.

If you've never used out of network benefits to pay for therapy, here's an overview of the process:

1. Contact your insurance company and ask how much they reimburse for outpatient psychotherapy if the provider is out of network. (Typically insurance plans reimburse anywhere from 40 to 70% of the total fee.)
2. Find out if there's a separate deductible you need to meet or if you've already met all (or part) of it. Also ask them if they have any paperwork that they need you to submit in addition to the receipt I will give you at each appointment.
3. When we meet, you will pay the full fee for the service. At the beginning of each month I will email you a receipt with all the information your insurance company needs to process your claim for the previous month.
4. If you are seeking couple counseling, ask if your policy covers this. Ask specifically if they cover diagnostic code *v61.1 Relationship problem with spouse or intimate partner*. Often, they only cover individual counseling.
5. In addition, if you are seeking family counseling, ask specifically if your policy covers *v61.20 Parent Child Relational Problem*.

Depending on the reimbursement rate of your insurance company your net cost per session may be equal to or only slightly more than what you'd pay for an in network provider, but without the restrictions that come with using in network benefits.

I accept Visa, MasterCard, Discover and American Express, Health Savings Account cards, cash and checks. My standard fee is **\$125.00 for an hour** (50 minute) session and **\$165 for an hour & ½** (80 minute) session.

The amount by which your fees can be reduced depends on your **total income** (line 22 of 2016 IRS 1040 tax form). Refer to the charts below to see how you may benefit from this arrangement. Please note that if you are using insurance to pay for therapy, sliding scale fees do not apply to you.

Here is the 5 step process to calculate what fee reduction, if any, for which you qualify:

- 1) On your 2016 tax return, locate the 'Total Income' amount (line 22 of IRS 1040 form)
- 2) Note which line of the Federal Poverty Guidelines chart applies to your family/household (1st chart below). The determining factor is how many members in your family/household (living at home)
- 3) Determine your total income as a percentage of the poverty guideline applicable to your family/household (e.g. if your total income is \$70,000 and there are 4 members of your household, then divide \$70,000 by \$25,100 and multiply the result by 100. The result is 278%)
- 4) Consult the Fee Reductions Guide (Chart 2 below) to see the % of fee reduction applicable. (e.g. 278% would qualify for a 15% fee reduction)
- 5) In the last chart (Chart 3 below), look up the amount of fee reduction and resulting fee (e.g. a 15% fee reduction for a 50 minute (1 hour) session would result in a \$105 fee instead of the full fee of \$125)

Chart 1 - 2018 Federal Poverty Guidelines

Persons in Family/Household (living at home)	Poverty Guideline
1	\$12,140
2	\$16,460
3	\$20,780
4	\$25,100
5	\$29,420
6	\$33,740
7	\$38,060
8	\$42,380

Chart 2 - Fee Reduction % Guide

% of Federal Poverty Level (FPL)	Fee Reduction
<100% FPL	50%
100 – 175% FPL	40%
176 – 250% FPL	30%
251 – 350% FPL	15%
>350% FPL	Full Fee (no reduction)

Chart 3 – Fee Reduction Results

Service	Full Fee	15% reduced	30% reduced	40% reduced	50% reduced
Individual, Couple & Family Psychotherapy					
50 min	\$125	\$105	\$90	\$75	\$63
80 min	\$165	\$140	\$115	\$100	\$83

Name: _____

Total Annual Income (line 22 of 2016 IRS 1040 form): _____

I also request the following circumstances be considered relative to a sliding scale fee:

I attest that the information above is accurate.

Signature: _____ Date: _____