

No Surprises Act

Effective January 1, 2022, congress passed the No Surprises Act as part of the Consolidated Appropriation Act of 2021. The act is designed to protect patients from surprise bills for emergency services at out of network facilities or with out of network care providers.

The No surprises Act enables patients to receive a Good Faith Estimate of the cost of care and billing disclosures which protects the consumer from surprise medical bills. This form serves to share information about the No Surprises Act and to outline all pricing and billing procedures of the private practice of Alexis Honeycutt, LMHC, NCC.

No Surprises Act General Information:

Under the law, health care providers need to give patients who are not using insurance an estimate of the bill for medical items and services.

“Surprise billing” is an unexpected balance bill. This can happen when you don’t have control over who is involved in your care. An example might be when you have an emergency or when you schedule a visit at an in-network facility but are unexpectedly treated by an out of network provider.

What is “balance billing” (sometimes called “surprise billing”)?

When you see a doctor or other health care provider, you may owe certain out of pocket costs, such as a copayment, coinsurance, and or a deductible. You may have other costs, or must pay the entire bill, if you see a provider or visit a health care facility that isn’t in your health plan’s network. Under the No Surprises Act, all billing, costs and out of network fees will be given as an estimate before care is agreed upon.

“Out -of network” describes providers and facilities that are not signed, or not in contract with your health plans. Out -of-network providers may be permitted to bill you the difference between what your plan agreed to pay and the full amount charged for service. This is called “balance billing.” This amount is likely more than in-network costs for the same service and might not count toward your annual out of pocket limit. Out of network providers can’t balance bill you unless you give written consent and give up your protections. You are never required to give up your protection from balance billing.

Provider Status:

Alexis Honeycutt LLC is a private pay private practice and is considered an out-of-network provider. This means the therapist is not contracted as part of your health plan. You are not required to get care out of your network. You can choose a provider or facility in your plan's network if you choose to use your insurance's mental health benefits. Please feel free to ask for resources in order to find a therapist that is in your network if you choose to use your insurance benefits for therapy.

Super Billing:

Super Billing is when you submit a bill or receipt outlining the costs and services you received to your insurance plan in order to access any out of network benefits available to you. As of January 1, 2022 Alexis Honeycutt, LLC/ Alexis Honeycutt, LMHC, NCC **will not** provide Super Bills for you to submit. A simple receipt (charge for service) can be made available to you upon request if requested at the time of session.

For questions or more information about your right to a Good Faith Estimate, visit

www.cms.gov/nosurprises

In response to the No Surprises Act, the following information regarding price, price changes, missed sessions and payments is listed for your convenience. This information is also located in the Informed Consent/New Client Paperwork as well as displayed in the office. Please sign below indicating your understanding of the disclosures below. You have the right to ask clarifying questions regarding payment at any time.

- Therapy with Alexis Honeycutt, LMHC, NCC is a fee for service exchange. Payment is due the morning of the scheduled session. Payment is due in the form of credit/debit card, or HSA card.
- Fee per **50**-minute session is \$175.00. If session extends beyond 60 minutes the client will be charged appropriately in 15-minute increments.
- Sessions are also available for 90 minutes at \$315.00 and 120 minutes for \$420.00.
- Couples Intensives Sessions can be scheduled upon request and are billed at \$775 for a half day assessment (3hrs), \$1475.00 for a full day pre-marital session, or \$1550 for a full day Intensive.
- Phone calls with Alexis Honeycutt are billed in 15-minute increments with a billed minimum of 15 minutes. 15 minutes = \$52.50.
- As a client of Alexis Honeycutt LLC, you are empowered to make decisions regarding scheduling

(which days, times, how often and how many sessions). There is never a requirement to continue therapy and every scheduled session can be cancelled up to 24 hours in advance with no cancellation fee.

- Cancellation fee: There is no reminder for appointments made. If a client forgets a session, has a calendar mishap or is unable to cancel within the 24hr window for any reason, they will be charged for the entire session fee.

No client and no situation are the same. The length of treatment for psychological problems (including marital issues) will necessarily vary from one individual/couple to another.

The following information taken from the American Psychological Association website (APA.org) regarding average length of time spent in therapy may be helpful:

- *Recent research indicates that on average 15 to 20 sessions are required for 50 percent of patients to recover as indicated by self-reported symptom measures.*
- *There are a growing number of specific psychological treatments of moderate duration (e.g., 12 to 16 weekly sessions) that have been scientifically shown to result in clinically significant improvements.*
- *In practice, patients and therapists sometimes prefer to continue treatment over longer periods (e.g., 20 to 30 sessions over six months), to achieve more complete symptom remission and to feel confident in the skills needed to maintain treatment gains.*
- *Clinical research evidence suggests that people with co-occurring conditions or certain personality difficulties may require longer treatment (e.g., 12-18 months) for therapy to be effective. There are a few individuals with chronic problems who may require extensive treatment support (e.g., maintenance therapy to reduce risk of psychiatric rehospitalization), but such patients are a minority of those who need or seek treatment.*

Source: APA Div. 12 (Society of Clinical Psychology)

Signing below signifies that you have read and understand the No Surprises Act of 2022 as stated above and that you understand that you have the right to discuss therapy billing at any time.

Client signature: _____ Date _____

Therapist Signature: _____ Date _____

Alexis Honeycutt, LMHC, NCC

Info@alexishoneycutt.com / Ph: (407) 314-3199