



All things money

Session rates, payment options, and info about insurance reimbursement (and why I'm not paneled)

Therapy fee information

In-Office Sessions: I hope you'll love my office as much as I do! It's in a cozy, loft-style space on the third floor of a beautiful old building in the Neighborhood of the Arts with ample off-street parking. Therapy sessions are typically 50 or 80 minutes long, which leaves me enough time at the end to complete documentation related to your care.

You're welcome to take a seat in the waiting room when you arrive for your appointment. Please help yourself to complimentary seltzer water, tea, or coffee while you wait.

Intake Session (90 minutes) – 175

Standard Follow-Up Sessions (50 minutes) – 110

Extended-Length Follow Up Sessions (80 minutes) – 165

Group therapy (60-75 minutes) – per-session and monthly payment options are available and vary by group

At the start of treatment, I ask that new clients consider attending weekly sessions for a period of time so we can establish rapport and make some headway toward your goals. It can be harder to feel like therapy

is worthwhile if the initial pace is too slow. If you have questions about the optimal frequency of treatment for you, or have barriers to attending weekly, please let me know.

Remote (Skype-style) Sessions: Sometimes inclement weather, minor illness or a packed work schedule prevents a client from getting to the office. Enter: remote sessions! I'll get you connected with a HIPAA-compliant platform called [Regroup Connect](#) so that we can have private but convenient sessions via computer. It uses Zoom technology and works great.

Remote sessions may also be for you if you'd like to work with me but live somewhere in New York State that's too far away from Rochester to be able to drive in for in-office sessions. Contact me to discuss this option! (I am unable to provide therapy to individuals who live out of state due to licensing restrictions.)

Remote session fees are the same as in-office fees – see above.

No Show / Cancellation within 24 Hours – FULL SESSION FEE

Your time is reserved for you. Missed or late-canceled appointments prevent me from using the time to help others. I charge the full fee for no-showed appointments or appointments canceled with less than 24 hours' notice.

If an unexpected circumstance is going to interfere with your ability to get to the office, get in touch so we can explore other options such as a phone or video session.

Payment options & info

My preferred method of payment is credit/debit/HSA card. Checks and PayPal are options as well.

I request to keep a card on file to make paying for your sessions as seamless as possible. I will ask that you enter your card information on the form provided to you in your electronic intake paperwork. The link to this form will be e-mailed to you after you schedule your intake session with me by phone. Once your information is entered, I am able to bill for sessions directly through my practice software.

Using out-of-network benefits

I do not take insurance (more on this below). You will be financially responsible for the cost of each session at the time of session. However, if you meet criteria for a mental health diagnosis, you may be able to submit for partial reimbursement for sessions using your out-of-network benefits. I can provide you with what's called a superbill -- aka the documentation that insurance companies need to consider reimbursement.

Please contact your insurance company directly prior to scheduling to find out the terms of your out-of-network coverage. Keep in mind that insurance companies often refuse to pay for couple/family therapy. Some plans have more comprehensive out-of-network benefits than others, and some plans do not offer much in the way of out-of-network coverage at all.

There is a new app called [Better](#) that can assist you with filing out-of-network claims with your insurance. As of this writing (April 2018), they take a 10% cut of whatever reimbursement you get. All you have to do is take the electronic statement that I send you and send it to Better via the app, and they handle the rest.

4 reasons why I don't take insurance

I am not currently paneled with any insurance companies. Many clients wonder why a therapist would choose not to make their services accessible to more people by participating with insurance. Here are some of my reasons:

Therapists have to diagnosis their clients to get reimbursed by insurance.

Insurance companies want proof of the medical necessity of any care, therapy included. They won't pay for "stress," "personal development," "rough patches," "help making difficult decisions" and often won't even pay for couples therapy. Unfortunately this excludes a lot of good reasons why people seek therapy. Insurance will only pay for therapy if the purpose is to resolve or treat a specific mental health diagnosis (i.e. major depression, OCD, PTSD). So, that means that anyone who sees a therapist and wants to use their insurance has to be given a diagnosis. This might not bother you, especially if you've been diagnosed before. And that's OK! Mental health diagnoses can be useful and there's nothing wrong with having a diagnosis.

But some clients balk at having a label attached to their insurance records, especially because this label becomes a permanent part of their record. I don't like diagnoses to be at the center of treatment; instead, I prefer to focus on your unique circumstances and experience — what's bothering you and why.

Your records are more secure and private when insurance is not involved.

When insurance is paying for your care, they can audit your records whenever they want. They can require that your therapist provide justification and documentation about your treatment and see details about your life and struggles. Again, this decrease in privacy matters a lot to some people and not as much to others. You may have personal or professional reasons why you'd prefer to keep records as private as possible.

Insurance companies often want to have a say in what happens in their customers' treatment.

Insurance companies usually want to see a treatment plan if they're going to pay for sessions, and sometimes have strong opinions about what the plan should look like and how much time it should take for someone to "get better." They might limit the number of sessions. This involvement can hinder your progress and interfere with my preferred approach.

Insurance companies can be very difficult to work with.

They often reimburse at a below-market per-session rate, sometimes audit charts years after a client has completed treatment, and can even "claw back" payments if there are any perceived errors in documentation or billing codes.