

KIDS, INC KC
FEE SCHEDULE FOR (DEC) 2023/2024

SERVICES

Initial Assessment/Diagnostic Interview-\$150 *(private pay-\$125)
Individual/Family Psychotherapy-- \$120 (50 minute session) *(private pay-\$110)
Co-parenting/Reintegration services-\$170

If you are contacting me regarding court-ordered cases, please contact The Layne Project @913-829-3711, Ext 100/ or admin@thelayneproject.com to schedule

Court related services-Consults with other providers (GAL's, attorneys, CMs, school meetings, IEP's, reviewing documents, letters or progress reports)-anything over 10 minutes- \$110 per hour. Court appearances/testifying/other court related duties-\$230 per hour (50% of estimated time due prior to court, plus prep and travel time). Note: When a therapist is subpoenaed to go to court, they are placed in a dual relationship role. Going to court may damage the therapist/child relationship. Therefore, parents waive the right to full medical records in the interest of creating a confidential, positive relationship with the child. I can provide however, a summary or brief update on treatment.

I accept Medicaid, Cenpatico, Amerigroup, Humana, UBH, Aetna, Cigna and Blue Cross/Blue Shield. Check with your local insurance carrier, as most out-of-network benefits are comparable to in-network. Payment due at the time of appointment and monthly claims will be provided (in order to submit to your insurance carrier). If you are in need of financial assistance, we can discuss discounted therapy services.

Cancellation policy: Please provide 24-hour cancellation notice. If client is ill the morning of scheduled appointment, please call by 9:00 a.m. to avoid charge.

1st missed appointment (without notice) - \$30
2nd missed appointment (without notice) - \$50
3rd missed appointment (without notice) - \$120

*In case of Divorce, copay is due at the time of service by the parent bringing the client. The % that each parent owes is between them (not this provider) and needs to be addressed outside of sessions.

I understand the policies, as given to me on this date - _____.

We reserve the right to send an account to collections if not paid in full.