

Payment Options

Jessica Tupa, LPCC | Sliding Fee Scale

It is my firm belief that everyone should be able to afford mental health care, regardless of insurance coverage or means. Since I do not bill insurance in my practice, I ask you to identify what you can pay within my scale and then I agree to that amount. While I ask you to define a number up front, I treat this like an ongoing conversation. As your circumstances change, simply let me know and we will change this agreement to meet your needs.

I use many tools to help determine what is fair for everyone. This document shares some of those methods for your own clarification.

1. My base fees are:
 - \$130 for initial appointments, and for 75 to 90-minute sessions
 - \$110 for 60 to 75-minute sessions
 - \$100 for 50 to 60-minute sessions

I use a sliding fee for each appointment category. As a scale it looks like this:

- 75 to 90-minute sessions

\$60	\$70	\$80	\$90	\$100	\$110	\$120
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- 60 to 75-minute sessions

XX	\$60	\$70	\$80	\$90	\$100	\$110
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- 50 to 60-minute sessions

XX	XX	\$60	\$70	\$80	\$90	\$100
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I let each client choose where they land on the scale, and I offer ways to assist in that selection. I don't ask for proof, and I don't argue. All I ask is that you pick what truly matches your sense of need and ability so that I can make my services accessible to everyone.

2. My basic sliding fee using income guidelines looks as follows:

Net Annual Household Income	50 to 60-Minute Sessions	60 to 75-Minute Sessions	75 to 90-Minute Sessions
\$85K and above	\$100	\$110	\$120
\$65,001 to \$85K	\$90	\$100	\$110
\$42,001 to \$65,000	\$80	\$90	\$100
\$33,001 to \$42,000	\$70	\$80	\$90
\$25,001 to \$33,000	\$60	\$70	\$80
\$15,001 to \$25,000	XX please ask	\$60	\$70
\$0 to \$15,00	I will be happy to refer you.		

Effective 5/1/2018

3. Often income is not a full picture of an individual's ability to pay. If you feel like the income guidelines don't match your needs, you can ask yourself some clarifying questions.
 - a. Consider paying less if you answer "yes" to any of the following:
 - i. Do you support children or have other people who depend on you for income?
 - ii. Do you have significant debt?
 - iii. Do you have medical expenses not covered by insurance?
 - iv. Do you receive public assistance?
 - v. Do you have immigration-related expenses?
 - vi. Do you perform unpaid work (such as: artistry, internships, or community organizing)?
 - vii. Have you been denied work due to a history of incarceration?
 - b. Consider paying more if you answer "yes" to any of the following:
 - i. Do you own the home you live in?
 - ii. Do you have investments, retirement accounts, or inherited money?
 - iii. Do you travel recreationally?
 - iv. Do you have access to family money and resources in times of need?
 - v. Do you work part time, by choice?
 - vi. Do you have a relatively high degree of earning power due to level of education or other social gains (even if you are not currently exercising your earning power)?
4. This infographic is another way of considering what your needs might be versus others:



PERSONAL FINANCIAL EXPERIENCE

*BASIC NEEDS include food, housing, and transportation. **EXPENDABLE INCOME might mean you are able to buy coffee or tea at a shop, go to the movies or a concert, buy new clothes, books, and similar items each month, etc.

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AGREEMENT PAGE

Name:	Date of Birth:
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I agree to pay:

- \$ _____ for initial appointment and 75 to 90-minute sessions
- \$ _____ for 60 to 75-minute sessions
- \$ _____ for 50 to 60-minute sessions

I AGREE THAT I WILL PAY IN FULL AT THE TIME OF EACH SESSION AT THIS RATE, UNLESS OTHERWISE DISCUSSED WITH MY THERAPIST.

Client/Guardian Signature Date

Relationship to Client

SIGNATURE OF PARTNER OR OTHER FAMILY MEMBER(S) (IF APPLICABLE):

Signature Date

Jessica Tupa, LPCC Date

Additional Notes: