Couples, Relationship and Family Therapy Private Pay Policy and Procedure

Starting October 1st, 2026, BWG Policy for Couples/Relationship and Family Therapy will move to a private pay agreement for those clients seeking relationship therapy, *and whose focus of treatment is strictly relationship concerns.* Anybody who wishes to commence relationship therapy can do so **immediately** at the self-pay arrangement, provided all steps outlined in this new policy are followed.

The following explains when we cannot bill insurance, and when we can bill insurance for a couple/relationship/family session.

- Our relationship, couples, and family therapy services focus on the relationship or family as a whole—not on treating one individual's mental health diagnosis. While a family member may participate in therapy billed to insurance ***when treatment is focused on one person's diagnosed condition*****,** insurance does not generally cover therapy when the primary focus is the relationship or family dynamic itself. Assigning or misrepresenting a diagnosis simply to obtain insurance coverage would be unethical and considered insurance fraud. For this reason, we will not bill insurance for those requesting relationship/couples/family therapy, where the focus of treatment would be on relational dynamics, healthy connection, trust, attachment, communication, etc, and will instead provide these services as private-pay.

- *However:* as stated above, some clinicians may be working with one identified client with a mental health diagnosis, and would like to include a

partner or family member in some of their sessions. In these circumstances, insurance may still be billed for treatment, keeping in mind the following requirements:

- Requirements for Billing 90847
    - **Identified Patient (IP):** One partner must be the primary client with a qualifying, billable clinical diagnosis (an F-code).
    - **Medical Necessity:** The documentation must show how involving the significant other directly helps manage or treat the (IP's) mental health condition, rather than just focusing on general relationship or communication growth.
    - **Session Duration:** The face-to-face time must last a minimum of 26 minutes (50 minutes is standard for optimal insurance reimbursement)

If you currently work with couples/relationships/families, please take some time to evaluate if your focus of treatment in sessions is on relationship concerns/dynamics, trust, communication, bonding, etc., or if your work truly represents one identified partner with a mental health diagnosis, and the partner/family member is present to help support that individualized treatment. *The mental health diagnosis must be the focus of treatment or management in order for the relationship session to be covered as medically necessary and paid for by insurance.*

If your work with the couple/relationship/family focuses primarily on relationship concerns, bonding, attachment, trust, infidelity, communication, etc, **and** we bill insurance for the individual partner with a partner/family member present, we are running the risk of insurance fraud. We will instead have these clients on a private-pay agreement.

For existing clients: Please inform any current couples/relationship/family therapy clients about this change in our policy to move towards self-pay, effective October 1st, 2026, particularly if your treatment with them is centered around relationship concerns, as detailed above. Please discuss this as soon as possible, so your clients can make an informed decision regarding their ongoing treatment needs. They may choose to either sign our private pay agreement form as of Oct. 1st, or they might want to be referred out to another practice/clinician for their care.

For new clients: The initial assessment can be billed to insurance as a 90791, to conduct a thorough assessment to determine if there is a diagnosable mental health condition. It's important to remember that although there may be a diagnosis, if they are seeking relationship therapy, we would not bill insurance for subsequent sessions, unless the client is informed of how their treatment would change and the clinician agrees to follow the guidelines for medical necessity insurance billing. If the clinician determines that there is a diagnosis, they will then 1. Clarify the clients' request for relationship therapy, and 2. Explain to them that the focus of treatment will be their relationship concerns (areas that are not typically covered by insurance) and therefore follow up sessions will be out-of-pocket. If clients push back and request to bill insurance for their mental health diagnosis, you can choose to see the individual with the partner present, as previously discussed, or refer them to another individual therapist to address their diagnosis, and treatment would center around those concerns/symptoms.

The following documents in this table of contents have been created and included within this policy to ensure both clinician and clients' understanding of this policy change.

1. **Website Disclosure Form**- This will be added to BWG's website for clients to be able to read up front about our policy and the rationale for private pay. Intake can refer clients to our site to read this prior to determining if they'd like to get scheduled with a provider for relationship therapy.
2. **Intake Script for Couples/Relationship/Family client calls**
3. **Conjoint Relationship Session Progress Note Disclosure-** This includes new billing codes required in every progress note (since we will not use traditional CPT codes) for Conjoint relationship sessions, with the option for self-pay IA, (if not in network with client insurance for the assessment) 60 min session or 90 min session, which will be required in every progress note.
4. **BWG Couples/Relationship/Family Therapy Private Pay Agreement Form-** This will be given to all relationship clients to sign at first appointment, indicating their understanding of our policy. They will also be assigned the Good Faith Estimate as well.

1. The Behavioral Wellness Group Couples, Relationship and Family Therapy Private Pay Policy (Website Disclosure)

We believe in providing the highest quality of care tailored entirely to your relationship and family needs. To maintain this standard, our practice operates on a private pay (self-pay) basis for all couples, relationship and family therapy services.

Why Insurance Does Not Cover Couples, Relationship and Family Therapy:

Health insurance operates strictly on a medical necessity model. This means insurance companies view therapy as a treatment for a diagnosed mental health illness or medical Condition.

● Relationship Focus vs. Medical Model: Relationship therapy focuses on communication, relational dynamics, and systemic growth. Insurance companies generally do not consider relationship distress or family conflict to be "medically necessary".

● The Diagnosis Requirement: To bill insurance, a therapist must assign a formal psychiatric diagnosis (such as Major Depressive Disorder or Generalized Anxiety Disorder) to one specific family member. The sessions must then focus primarily on treating that individual's diagnosis, rather than improving the overall relationship or family system.

Because we treat the relationship as the client—rather than labeling one person as the "problem"—we do not bill insurance directly.

Advantages to bypassing insurance and paying out of pocket for services:

Greater Privacy and Confidentiality

● There will be no mental health diagnosis attached to your permanent medical records, and notes are not shared with third-party insurance companies.

● We can focus entirely on relationship goals, family dynamics, communication, etc without labeling any one particular person with a mental health related disorder.

The Ability to Customize your Care

● When using insurance, you are oftentimes regulated to a certain number of sessions that are allowed, how long each session lasts, and how frequently you

are seen.

● With private pay, you have the option to decide what works best. You can choose longer session times such as 90 minute sessions, and can meet as often as you'd like, without insurance company restrictions.

Please note: Your initial visit may be billed to insurance for a thorough clinical assessment, if the provider is in-network with your insurance plan. At that first appointment, your provider may determine a mental health diagnosis that will be used to bill your insurance for that visit. However, if you are requesting the focus of treatment to be on relationship concerns, communication, family dynamics, etc, then all follow up visits will have to be self-pay, and you can receive a referral for individual therapy if you'd like to use insurance to bill and address individual diagnoses.

BWG Self Pay Fees:

Initial Assessment (60-90 min.) $175

Follow Ups:

60 min: $145
90 min: $185

2. *INTAKE SCRIPT FOR COUPLES /RELATIONSHIP/ FAMILY THERAPY SESSIONS:*

"WE CAN GET YOU SCHEDULED FOR AN INITIAL ASSESSMENT SESSION. NOW I HAVE TO GIVE YOU OUR DISCLAIMER: **PLEASE KNOW THAT THE INITIAL ASSESSMENT FOR COUPLES/RELATIONSHIP/FAMILY SESSIONS WILL BE BILLED TO YOUR INSURANCE COMPANY, BUT FOLLOW UP APPOINTMENTS WILL BE SELF PAY ONLY.** AT THAT FIRST INITIAL ASSESSMENT SESSION, YOUR THERAPIST WILL DO A COMPLETE HISTORY AND EVALUATION. ALL PARTIES MUST BE PRESENT FOR THE INITIAL ASSESSMENT AND ALL FOLLOW UP VISITS. AFTER THE INITIAL ASSESSMENT, THE FOLLOW UP SESSIONS WILL NOT BE BILLED TO YOUR INSURANCE COMPANY. PLEASE ALSO KNOW THAT PAYMENT IS DUE AT EVERY SESSION. YOUR THERAPIST WILL DISCUSS THIS FURTHER WITH YOU AT YOUR INITIAL ASSESSMENT SESSION.

(THEY CAN BE REFERRED TO THE THERAPIST AND / OR OUR WEBSITE FOR FURTHER EXPLANATION)

SELF-PAY AMOUNTS

INITIAL EVALUATION (60 – 90 MIN)	175.00
FOLLOW UPS	
60 MIN	145.00
90 MIN	185.00

WOULD YOU LIKE ME TO SCHEDULE THAT INTAKE APPOINTMENT FOR YOU?"

3. CONJOINT RELATIONSHIP SESSION PROGRESS NOTE DISCLOSURE STATEMENT

THIS IS TO BE INCLUDED IN EVERY CONJOINT SESSION PROGRESS NOTE

IF VIRTUAL, ALSO INCLUDE THIS:

THIS WAS A VIRTUAL SESSION USING ZOOM'S HIPAA COMPLIANT PLATFORM.

(include one) AUDIO ONLY
AUDIO AND VISUAL

DISCUSSED COST-BENEFITS/RISKS/ALTERNATIVES RELATED TO SUCH A SESSION AND PATIENT OPTED TO PROCEED WITH THE VIRTUAL SESSION.

PROCESSED ONGOING VIRTUAL VISITS VS RIGHT TO BE SEEN IN THE OFFICE BY AN AVAILABLE THERAPIST. PT UNDERSTANDS THE OPTIONS, ADVANTAGES / DISADVANTAGES AND AGREES TO CONTINUE VIRTUALLY AT THIS TIME. PT ASSURED CONFIDENTIALITY.

PT 1 (Identified client) WAS LOCATED AT HOME **DURING THE SESSION.**

PT 2 WAS LOCATED AT HOME **DURING THE SESSION.**

****IF IN PERSON, ONLY INCLUDE THIS:***

THIS WAS A CONJOINT SESSION: COUPLES / RELATIONSHIP/ FAMILY

THE MAIN FOCUS OF THIS SESSION IS RELATIONSHIP ENHANCEMENT, COMMUNICATION, CONFLICT RESOLUTION, REBUILDING TRUST, ENHANCING INTIMACY, AND/OR NAVIGATING LIFE TRANSITIONS.

NO PERSON PRESENT HAS A PRIMARY MENTAL HEALTH DIAGNOSIS WHICH WAS THE MAIN FOCUS OF THIS SESSION.

ALL PRESENT ACKNOWLEDGE THAT THIS TYPE OF SESSION IS NOT BILLABLE TO INSURANCE AND HAVE SIGNED A SELF-PAY CONJOINT SESSION AGREEMENT AND GOOD FAITH ESTIMATE.

COUPLE WAS EDUCATED ON INSURANCE AND BILLABLE VS NON-BILLABLE MENTAL HEALTH SESSIONS. PROCESSED RIGHT TO BE SEEN BY ANOTHER PROVIDER AT ANOTHER OFFICE IF THEY SO CHOSE. PT UNDERSTANDS THE OPTIONS, ADVANTAGES / DISADVANTAGES AND AGREES TO CONTINUE WITH THIS SESSION AT THIS TIME.

Coding

CODES:

CNJNTIA: CONJOINT IA (IF DOING SELF PAY) 175.00

CNJNT60: CONJOINT SESSION 60 MIN 145.00

CNJNT90: CONJOINT SESSION 90 MIN 185.00

4. The Behavioral Wellness Group
Couples/Relationship/Family Therapy Private-Pay Agreement Form

Client Names: _____ Date(s) of Birth: _____

Client Names: _____ Date(s) of Birth: _____

We are signing this agreement to indicate that we are seeking couples, relationship or family therapy services with _____ at The Behavioral Wellness Group and understand that these services will be self-pay and will not be billed to insurance.

Why Insurance Does Not Cover Couples, Relationship and Family Therapy (Will be referred as relationship therapy)

Health insurance operates strictly on a **medical necessity** model. This means insurance companies view therapy as a treatment for a diagnosed mental health illness or medical condition.

- **Relationship Focus vs. Medical Model:** Relationship therapy focuses on communication, relational dynamics, and systemic growth. Insurance companies generally do not consider relationship distress or family conflict to be "medically necessary".
- To bill insurance, a therapist must assign a formal psychiatric diagnosis (such as Major Depressive Disorder or Generalized Anxiety Disorder) to one specific family member. ***The follow up sessions must then focus primarily on treating that individual's diagnosis,*** rather than improving the overall relationship or family system.
- **The Clinical Distinction:** Therapy for one person's diagnosis allows for the inclusion of a family member, whereas treating the dynamic itself (relationship therapy) is a non-medical service.
- **Inventing or misrepresenting a diagnosis in order to use and bill insurance is considered fraud and highly unethical.**

Because we treat the **relationship as the client**—rather than labeling one person as the "problem"—we do not bill insurance directly.

Advantages to bypassing insurance and paying out of pocket for services:

Greater Privacy and Confidentiality

- There will be no mental health diagnosis attached to your permanent medical records, and notes are not shared with third-party insurance companies.
- We can focus entirely on relationship goals, family dynamics, communication, etc without labeling any one particular person with a mental health related disorder.

The Ability to Customize your Care

- When using insurance, you are oftentimes regulated to a certain number of sessions that are allowed, how long each session lasts, and how frequently you are seen.
- With private pay, you have the option to decide what works best. You can choose longer session times such as 90 minute sessions, and can meet as often as you'd like, without insurance company restrictions.

We understand and acknowledge the following:

- Relationship therapy is often not considered medically necessary treatment by insurance companies unless one identified client has a diagnosable mental health condition that is the primary focus of treatment. We understand that insurance companies only pay for the treatment of diagnosed mental health conditions, they don't cover services focused on communication, relationship enhancement, or conflict resolution.

- The services we are seeking are primarily relationship therapy services and therefore will be the focus of treatment, and will not qualify for insurance reimbursement or coverage.

- We acknowledge that our provider has informed us that insurance will not cover ongoing relationship therapy services because they are not considered medically necessary or are excluded under the terms of our insurance plan. We understand and agree that insurance will not be billed for ongoing relationship therapy services.

- We are voluntarily choosing to receive relationship therapy services on a self-pay basis and understand that our provider will not bill insurance for these services.

- We understand that we are financially responsible for the full cost of all services provided, including telehealth sessions, consultation time, and any other non-covered services.

- We understand that payment is due at time of service, and that we waive any future right to seek reimbursement from our therapist for services already provided. BWG will not provide a superbill for any relationship therapy sessions.

- We understand that if our provider does not identify a diagnosable mental health issue *that is the main focus of treatment*, BWG will not support independent submission of claims to my insurance company.

Description of Service Self-Pay Fee

Initial Assessment: $175

Follow ups

60 min: $145

90 min: $185

We have chosen to begin/continue treatment with my provider on a self-pay basis (after the initial assessment).

We understand that we have a right to a copy of this form. This consent is subject to revocation at any time except to the extent that action has been already taken in reliance thereon.

We have been provided a Good Faith Estimate for Self-Pay services and have signed that document.

We have read and understand this agreement. By signing this agreement, we know that we are creating a binding contract that is legally enforceable against me by the provider.

Signature of Client: _____

Signature of Client: _____

Printed Name: _____ Date: _____

Printed Name: _____ Date: _____