

# FREQUENTLY ASKED QUESTIONS

## Our Location

We are located in the large white building on the corner of York and Ogden, with 2 office suites, one on the first floor (Suite 106) and an annex (Suite 40) on the lower level, in Hinsdale. Our address is:

 **201 E Ogden Ave, Hinsdale.**

## About Services

We are a group of mental health clinicians who specialize in working with children ages 2-12 years old and their families. We provide individual counseling, parent/child counseling, family counseling and parent coaching services.

## About Payment

We are a **private pay mental health practice** and are considered out-of-network providers. This means we collect payment for each session from the clients at the time of each service.

 **Watch this video**

## Cost of Therapy

\*varies depending on therapist

Ongoing client sessions (45-55 min)  
Starting at \$160\*

# \$160 – \$200

Parent intake/consultation sessions  
starting at \$200\*

Note: there is a \$60 non-refundable down payment for the first scheduled appointment which will be placed towards the total payment for your Parent Intake session.

If you choose to use your out of network insurance benefits we are able to provide you with treatment receipts to send to your insurance company for potential reimbursement.

When choosing to seek reimbursement we suggest you become familiar with your out of network benefits by calling the mental health number on the back of your insurance card and asking the questions outlined in the attached PDF.

Please feel free to reach out with any additional questions.

Email: [frontdesk@kidmatterscounseling.com](mailto:frontdesk@kidmatterscounseling.com)  
Phone: (855) 543-7687

## Attached PDFs

Clients Guide to Verifying Insurance Coverage



# CLIENT'S GUIDE TO VERIFYING INSURANCE COVERAGE

Have your insurance card nearby.  
Speak to a customer service representative, as the  
automated benefits line does not always include Behavioral  
Health benefits.



## A. Verifying Benefits

"I need my benefits for Outpatient Mental Health with in-network and out-of-network providers."

Please Note: **Kid Matters Counseling** is considered an Out of Network Provider.

- "What is the effective date of coverage?"
- "What is the annual deductible?" and "How much has been met to date?"
  - "What is the percentage paid after deductible is met?"
- "What is the copayment or coinsurance amount for the following CPT codes: 90837, 90785, 90791, 90846"



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- “Is a referral from a Primary Care Physician or Medical Group required?” (Usually HMO) \*If this is required, **only** the member/client is authorized to obtain this referral and should follow through accordingly.
- “Where do we mail claims?”
  - “Is precertification required?” If so, transfer to Authorizations Department and follow guidelines under Section B.

## B. Obtaining Authorization/Precertification

- Know your therapist’s name, credentials and mailing address. (See top of page)
- “What is the authorization number?”
  - “What is the authorization start date and end date? (Be sure to disclose your first session date, if you know it, so it will be included in the authorization.)
  - “How many sessions are authorized?”
    - “Where do we mail claims?” (**IMPORTANT:** This is often a different address than the one used in cases where precertification is NOT required).

