

## Fee Schedule

The charges for each visit are determined based on the applicable Current Procedural Terminology (CPT) codes. These codes represent the types of services rendered, complexity of medical decision-making, time, documentation, and other factors. In my practice, most new patient visits are billed as a 99204 or 90972 (\$400), and subsequent sessions are typically billed as either a 99213 & 90836 (\$375), 99212 & 90836 (\$325), 90834 (\$275), or 90845 (\$275). Patients are welcome to inquire regarding which codes will apply to their visits. The table below summarizes the aforementioned codes, though please note that this is not an exhaustive list; other codes may be used under some circumstances. The table on the second page outlines my fees pertaining to missed or canceled appointments and services rendered outside of scheduled office visits. Fees in the second table are not covered by insurance, and are therefore billed directly to the patient. All fees are subject to change; see [frazeeemd.com/finances](http://frazeeemd.com/finances) for the most up-to-date version of my fee schedule.

CPT code	Description	Fee
99204	New patient office visit, level 4	\$400.00
90972	Psychiatric diagnostic evaluation	\$400.00
99212	Established patient office visit, level 2	\$140.00
99213	Established patient office visit, level 3	\$190.00
90836	Psychotherapy, 45 minutes (this is an add-on code, to be used in combination with an "Established patient office visit" code)	\$185.00
90834	Psychotherapy, 45 minutes (to be used without an office visit code)	\$275.00
90845	Psychoanalysis	\$275.00

### SELF PAY DISCOUNT

When a patient pays me directly, it simplifies my billing and collections process, saves time that would otherwise be spent communicating with the insurance company, reduces the delay between service and payment, and eliminates the risk of claims denial. As such, I am happy to offer a discount of \$25 per visit when the following conditions are met:

- Payment is received in full at the time of service or according to an agreed upon schedule, and
- No claims for these visits are submitted to any third-party payor.

Reason for charge	Description	Fee
Late cancellation	Any appointment that is missed or canceled with less than 24 hours notice	\$200.00
Excessive cancellations	Any appointment that is canceled, even if greater than 24 hours notice is provided, when more than 15% of all appointments during the preceding one year period have been canceled without any fee	\$200.00
Late reschedule	Any appointment that is successfully rescheduled such that there is no reduction in the number of sessions will not be counted as a cancellation, though there will be a "late reschedule" fee if the request to reschedule was submitted less than 24 hours before the original appointment	\$50.00
Services rendered outside of office visits	Any professional services rendered outside of scheduled office visits, including exchanges by phone or email, drafting of letters, reports, or other paperwork (excluding my own medical records), consultation provided to other professionals involved in your care, involvement in legal proceedings, or travel time related to any of the above	\$75.00 per 15 minutes, rounded down to the nearest 15 minute interval for the total time spent providing all such services during a given month
Medical records preparation (fax or email)	Preparation of medical records to be provided via fax or email. Requests for a paper copy of medical records may involve additional fees.	\$30.00