**The Wilson Center for Well-Being, LLC**

**TABLE OF SERVICES AND FEES**

**Effective 1-1-2022**

|  |  |  |
| --- | --- | --- |
| **Service code****(CPT Code)** | **Description** | **Fee for Service (Number of Sessions Will Be Determined as We Progress & )** |
| 90791 | Initial Diagnostic Evaluation | 140.00 |
| 90832 | Psychotherapy, 16-37 minutes | 90.00 |
| 90834 | Psychotherapy, 38-52 minutes (Includes EAP and standard United Healthcare sessions.) | 125.00 |
| 90837 | Psychotherapy ≥ 53 minutes (This is my standard session length.) | 140.00 |
| 90839 | Psychotherapy for a Crisis (30-74 minutes) | 200.00 |
| +90840 | Psychotherapy for a Crisis(add on code for each additional 30 mins) | 100.00 |
| 90846 | Family Psychotherapy without Patient Present, 55 minutes | 140.00 |
| 90847 | Family Psychotherapy with Patient Present, 55 minutes | 140.00 |
| 90853 | Group Psychotherapy | 40.00 (60 min)60.00(90 min) |
| 98966-98968 | Telephone Assessment & Management beyond 15 minutes | $2.00 per minute |
| 98970-98972 | Online Digital Evaluation & Mgt beyond 15 minutes(Responding to Email & Text Messages) | $2.00 per minute |
| Session Package | 6 55 minute sessions purchased in advance | $756.00 |
| Late Cancellation/No Show Fee  |   | $85.00 |
| Production of Records/Completion of Forms |  | $25-$100 depending on time needed |
| Legal Fees |  | $1200 per day due 7 days prior |

Please note that Place of Service (in office vs. telemental health) is not delineated above since the charges are identical.