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Making Psychotherapy Accessible and Affordable©

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In our journey toward mental well-being, psychotherapy stands out as a beacon of hope, offering profound insights and pathways to healing.

Depending upon the type of mental health problem, therapy has a success rate of 70-90%. About 80% of people see those benefits within 6-12 months. About 10-20% of clients need long-term treatment.

It's very important to think that mental health treatment is an investment in your health and the health of your family. Let us remember that mental health is an integral part of overall well-being

Often, people don't follow through on getting therapy they need and want. Why? Sometimes it is because they think therapy may be too expensive. They may become discouraged when told of a multi-week wait for an appointment. Sometimes it's because of the stigma around mental health treatment, biases or myths about it, or lack of familiarity with it. In this article, let's discuss cost and accessibility.

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Assess to Treatment

Psychotherapy, with its myriad approaches, including cognitive-behavioral therapy, psychodynamic therapy, family therapy, and many other approaches supported by research, offers tailored solutions to mental health issues. Its benefits are far-reaching, from providing coping mechanisms for anxiety and depression to offering support through life's transitions. Yet, the cost of individual sessions, which can range widely, often puts it out of reach for those who might benefit the most.

The factors that determine the cost include location, the concentration (or lack thereof) of therapists in a locale, therapist's expertise and training level (e.g., intern, post-graduate trainee, fully licensed clinician), and specialization (e.g., depressions, grief, anxiety, couples, etc).

The benefits of psychotherapy are far-reaching, from providing coping mechanisms for anxiety and depression, to overcoming substance abuse, to improving relationships, to offering support through life's transitions, and more.

In many parts of the United States there is a shortage of mental health personnel relative to the need. We know that in 2020 through 2023, there was an increased need for mental health services that was particularly spurred on by the pandemic. It is especially true for children as they were home from school in 2020 and 2021. Their isolation from other children and the need for virtual learning platforms revealed an increased amount of difficulties for those students who had mental health problems and were isolated from other children.

There also had been shortages of medications for attention deficit hyperactivity disorder and some other problems.

As an example, our office in Brown Deer, Wisconsin, is in a high needs mental health treatment shortage area even though it is within a metropolitan location! We have purposely located all three of our offices in areas that have a shortage of mental health personnel.

We often hear from callers that they have called several clinics and been told the wait is to six weeks to three months. We've heard that people are on waiting lists. This tends to discourage people from following through.

We also know from a large body of research that treatment delivered within a week or two of the onset of the need for treatment leads to shorter treatments and more complete and

effective healing.

We also know that treatment delayed for several months can be problematic for many people. Their own natural ways of coping set in. If those ways of coping are dysfunctional, such as drinking, withdrawing from others, or avoidance, to name a few, their later adjustment in life may be diminished. Perhaps treatment that would have been delivered more rapidly may have led to improved coping capacities.

As a result, we have designed our clinic as a training clinic so that we always have an adequate number of people to serve our clientele with the integrity that comes from these research findings, namely that they should be able to get services fairly quickly. For people who have coverage by Medicaid or Badgercare (often called "state insurance") or the state Medicaid HMOs, we are able to provide service very rapidly.

Some of the insurance companies have networks of providers within a clinic, and they are the only ones who can take that kind of insurance. While normally that does not pose a problem for rapid access, occasionally our slots for certain insurance companies may be filled and there might be a short delay.

However, we do try to get everyone the offer of an appointment within 3 to 14 days. That's our goal. And we have been achieving that some 90% of the time. We think that should be a standard. Indeed, there is a federal standard that when you are discharged from a psychiatric inpatient program, your outpatient session should be within 7 days.



Besides the problem of getting an appointment rapidly, the other reason that people may find access difficult is that they call numbers for therapists and leave messages and have to wait for call-backs. Or they are calling a central scheduling system for a hospital chain or a very large institution. That may mean talking to someone who schedules, but does not specifically know how to respond to a mental health or emotional crisis.

So, what we have done is created a team of schedulers that we call our Referral Department to answer your calls sensitively and empathically. They gather the necessary information to set you up with therapy. Most of the time, we can do this in a single phone call, Occasionally, we have to double check on openings for your particular request for time of day and day of the week and a location. So, then we may need to have more than one phone call. We tried to design a system that makes it as easy as possible for our callers. We encourage other systems to develop methods that are equally streamlined.

Cost and Affordability

However, for many, the cost of therapy presents a barrier. It may seem like a luxury rather than a necessity. This underscores a critical issue in mental health care—affordability. Let's talk about the expense of psychotherapy and how sliding fee schedules can play a role in making mental health care more accessible to all.

Let's begin with insurance coverage. Sometimes the insurance pays 100 percent of behavioral health costs.

Deductibles. Sometimes it does not pay any cost until a deductible is met. Recently, we have seen deductibles range from \$500 to \$6000.

Allowable Amount. The insurance company sets an allowable amount that they will attribute to your deductible for each therapy session. That means that they are not attributing the entire bill to the deductible. For example, we bill \$150, but the insurer may set a maximum amount they will pay of \$100. They will only put \$100 towards deductible.

Copayments. The third factor in insurance is co-payments. We sometimes see policies with no co-payments. The most we have seen is a set amount of \$50 which you pay out of pocket, and then the insurance pays an amount. *If the therapist is in your network, the therapist is bound by a contract with the insurance company to charge you only the amount that the payer allows.* But the therapist may be out of network, in which case you would be responsible for the entire difference between what the insurance pays and what the therapist charges.

Networks. Many clinics such as Shorehaven are “in network” with many insurance companies. That means we have a contract with the company that allows discounted rates and has various other requirements. In exchange, the subscribers (customers) of that insurance can come to us for care. In-network providers bill the insurance for you and you pay the deductibles and co-payments to the provider.

Some therapists who are out-of-network, meaning they are not contracted with the insurance company, have you pay their bill in advance and then give you a statement, called a Superbill. You submit that to your insurance company yourself. Then you get reimbursed whatever your insurance is willing to allow for that service and that provider. That is, if your insurance allows for out-of-network providers. Many insurance companies are HMOs, health maintenance organizations, which do not have out of network benefits and require you to go to someone in your network. PPO and POS plans do permit out-of-network providers.

Good Faith Estimate. Some therapists only accept cash payment. They may give you a superbill. These therapists will give you a derally-required GFE form, a Good Faith Estimate. That is their best estimate of the total cost of the therapy. Unlike repair of a broken bone – where the number of medical services is generally known in advance, so it may require setting the bone, two visits to the doctor, and perhaps 10 sessions of physical therapy – the number of visits of psychotherapy you may need is not easily predicted. The GFE will be a best guess as to the cost.

All of this can be quite confusing for many people and they don’t understand necessarily why they end up with a bill. So one of the things that is very important is to have a good idea of the expense before you start. That way, you will know your deductibles and co-payments and you can budget for them up front.

To repeat, it’s very important to think that mental health treatment is an investment in your health and the health of your family. If you think about individual sessions, it may seem expensive. However, if you think about the entire cost of a period of help, from that perspective the total cost seems doable. Let’s assume that the period of help is for a limited problem and the therapist believes that you should feel much better in 10 sessions or 15 or 20. Then we can estimate how much money you might be out of pocket.

For example, let’s say therapy will be 20 sessions and that you have a \$1000 deductible. Roughly the first 7-12 sessions all comes go to your deductible, for \$1000. Then, let’s say you co-payment is \$25. The next 10 sessions will cost just \$250. The total for 20 sessions over 4-6 months is \$1250. *That seems like a pretty reasonable price to pay for your mental health.*

Sliding Fee Scale. If, however, for some people that still becomes too unaffordable and we will talk about that a little below. For those on a tight budget or in debt, the cost of therapy sessions, which typically occur weekly, sometimes 2-3 times a week, sometimes biweekly, can accumulate quickly. That could turn what should be a healing process into a source of stress. This is where the concept of sliding fee schedules comes into play—a practice that I, along with many of my colleagues, strongly advocate for. Sliding fee schedules adjust the cost of therapy based on the client's income and ability to pay. That makes mental health care more equitable for those who do not have insurance.

The beauty of sliding fee schedules lies in their flexibility and compassion. They embody the very essence of psychotherapy – compassion -- by recognizing the individual's circumstances and offering support tailored to their needs. This approach not only opens the doors of therapy to a broader audience, but also reinforces the therapeutic alliance—a cornerstone of effective therapy—by building trust and understanding from the outset.

To access a sliding fee scale, by law the clinic has to show the client has a proven need for discounted services. You will likely be asked to show some documentation of income.

For therapists and mental health professionals, implementing a sliding fee schedule can be a step towards breaking down the financial barriers that prevent potential clients from seeking help. It's a testament to our commitment to accessibility and equity in mental health care, ensuring that therapy is not a privilege, but a right available to all, regardless of their economic situation.

In advocating for more affordable psychotherapy options, we also encourage insurance companies, policymakers, and mental health organizations to recognize the importance of mental health services and work towards more inclusive coverage and funding models. Community-based programs and online therapy platforms are also emerging as cost-effective alternatives, offering additional pathways for individuals seeking support.

As a clinical psychologist with over 50 years of experience, I've witnessed firsthand and hundreds of times the transformative power of psychotherapy. It's our duty to ensure that this tool for change is not reserved for a select few, but rather is accessible to everyone who needs it. By embracing practices like sliding fee schedules, we take a significant step towards demystifying and destigmatizing mental health care, paving the way for a healthier, more resilient society.

In closing, let us remember that mental health is an integral part of overall well-being. Making psychotherapy affordable and accessible is not just an investment in individual

health but a commitment to the collective well-being of our communities. Together, we can work towards a future where everyone has the opportunity to heal, grow, and thrive.

Shorehaven Behavioral Health is a mental health clinic and training center with therapy offices in Brown Deer, Greenfield, and Mt. Pleasant, and also offering telehealth throughout Wisconsin. We specialize in challenging cases and rapid access to services. In addition to depression, anxiety, behavioral problems, and most other psychological problems, we work extensively with children & families and with substance use problems. Our DBT program has three groups – for younger adolescents, older adolescents, and adults – and has openings. We also accept referrals for substance abuse care from clinicians who are not comfortable with that population. Call 414-540-2170.

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