



College of Education

The Connie Belin & Jacqueline N. Blank
International Center for Gifted Education and
Talent Development

600 Blank Honors Center
Iowa City, Iowa 52242-0454
800-336-6463 319-335-6148
Fax 319-335-5151
belinblank@uiowa.edu
belinblank.education.uiowa.edu

Belin-Blank Center Assessment and Counseling Clinic

Notice of Your Right to Receive a Good Faith Estimate and Additional Information

Beginning January 1, 2022, health care providers are required to estimate the cost of services for patients self-paying or not using their insurance because the provider is out of network for their benefits. We are required to provide an estimate of planned services so that you can make the best decision about your own health care services and expenses.

Upon request or upon scheduling an appointment, we will provide a detailed list of expected charges for your services in the Assessment and Counseling Clinic. It is likely that your provider will over-estimate the cost of services to provide you with the maximum expected out-of-pocket cost. This estimate is based on information known at the time the estimate was created. If additional services are requested or recommended, a new estimate will be provided. These estimated costs are valid for 12 months after the date of the Good Faith Estimate. The Good Faith Estimate is not a contract and does not obligate you to obtain the services included in the estimate. Please talk with your provider about the estimate if you have questions or concerns.

The Good Faith Estimate does not include any unknown or unexpected costs that may arise during treatment. You could be charged more if complications or special circumstances occur. If this happens, federal law allows you to dispute (appeal) the bill.

If you are billed for more than this Good Faith Estimate, you have the right to dispute the bill.

You may contact the provider listed to let them know the billed charges are higher than the Good Faith Estimate. You can ask them to update the bill to match the Good Faith Estimate, ask to negotiate the bill, or ask if financial assistance is available.

You may also start a dispute resolution process with the U.S. Department of Health and Human Services (HHS). If you choose to use the dispute resolution process, you must start the dispute process within 120 calendar days (about 4 months) of the date on the original bill.

There is a \$25 fee to use the dispute process. If the agency reviewing your dispute agrees with you, you will have to pay the price on this Good Faith Estimate. If the agency disagrees with you and agrees with the health care provider, you will have to pay the higher amount.

Services and Fees Schedule (Effective 7/1/2022 through 6/30/2023)

DIAGNOSTIC ASSESSMENT

<u>Service Code</u>	<u>Service Description</u>	<u>Fee</u>
90791	Psychological Diagnostic Interview	\$200
96130	Psychological Evaluation Services – Base	\$250
+96131	Psychological Evaluation Services – Add-on	\$190
96132	Neuropsychological Evaluation Services – Base	\$270
+96133	Neuropsychological Evaluation Services – Add-on	\$210
96136	Psychological Testing with Psychologist – Base	\$95
+96137	Psychological Testing with Psychologist – Add-On	\$85
96138	Psychological Testing with Technician/Trainee – Base	\$75
+96139	Psychological Testing with Technician/Trainee – Add-On	\$75
+90785	Interactive Complexity – Add-On	\$20

2e evals typically involve at least 12 units (6 hours) of testing codes, and at least 6 units (6 hours) of evaluation services codes. More complex cases will require additional units to address referral question(s).

**NON-DIAGNOSTIC ASSESSMENT
(NOT BILLABLE TO INSURANCE)**

<u>Service Code</u>	<u>Service Description</u>	<u>Fee</u>
96138	Educational Testing with Technician/Trainee – Base	\$75
96139	Educational Testing with Technician/Trainee – Add-On	\$75

Educational evals typically involve 12 units (6 hours) total. More complex cases may require additional units to complete assessment.

90899	Career Assessment	\$250
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THERAPY

<u>Service Code</u>	<u>Service Description</u>	<u>Fee</u>
90791	Therapy Diagnostic Interview/Intake Session	\$200
90832	Therapy Session (30 minutes)	\$90
90834	Therapy Session (45 minutes)	\$120
90834	Therapy Session with Trainee	\$10
90837	Therapy Session (60 minutes)	\$170
90853	Group Therapy	\$45
90785	Interactive Complexity – Add-On	\$16

**CONSULTATION
(NOT BILLABLE TO INSURANCE)**

<u>Service Code</u>	<u>Service Description</u>	<u>Fee</u>
90887	Consultation with Psychologist	\$150 per hour
90887	Consultation with Postdoctoral Fellow	\$125 per hour