



# COMPASS

The Newsletter for the  
Association of Private Practice Therapists  
- SUMMER 2008 -

## APPT: The Next 15 Years

The APPT Board of Directors and many of the past presidents from the last 15 years met on June 6 for a retreat to evaluate the progress of the association and help map out the next 15 years.

Among items addressed were a review of the organization's original mission statement, which led to a re-emphasis of the goal of supporting private practice therapists, particularly in the continuing education programs offered by the association. While many of the area's mental health-related professional associations offer clinical continuing education, APPT has a unique role in providing guidance on practice management issues, and this will be reflected in upcoming programs, including the association's Fall Conference on Friday, Oct. 17. This all-day event, scheduled to be held at the Westside Community Education Center (just south of 108th & Grover Street in Omaha) will feature sessions designed to help private practice therapists with start-up, office management, staffing, billing and reimbursement, financial, and marketing issues.

Another major point of discussion is the membership structure and dues. It was recommended that APPT consolidate membership of the "Agency" and "Affiliate" membership into one "Associate" category covering therapists who are not currently in private practice (including retired therapists, those in agencies who may wish to become private practice therapists at some point, academics, etc.) Traditional members are private practice therapists (either full-time or part-time), and their dues are equal to their "usual and customary" charge for one hour of therapy. Dues for traditional members currently range from \$30-\$150, with an average of \$93.80 for 2007.

The board will also look at enhancing the programs and services available to members, especially those outside of the Omaha area, with the creation of a "Regional Relations" board position for Kathy Dombrowski, MA, a Lincoln-based therapist.

### AUG. 15 MEDICAID & LIMHP WORKSHOP

Friday, August 15, 2008  
Mahoney State Park • Ashland, Neb.  
Main Lodge Building (3 CEUs)

8-8:30 a.m. – Registration  
8:30-11:30 a.m. – Program  
11:30-11:45 a.m. – Wrapup

**\$50 APPT Members • \$60 Non-Members**

*Representatives from the Division of Medicaid & Long-Term Care Nebraska Department of Health & Human Services*

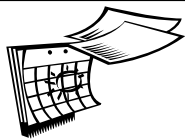
- Medicaid & the LIMHP – How the LIMHP Affects Therapists
- Supervision and Consultation: What's the Difference?
- The Basics: Medicaid Claim Documentation Requirements

*Jason Yungtum*

*Attorney, Erickson & Sederstrom Law Firm*

- The Federal Medicaid Audits: Winds of Change ... or a Lot of Hot Air?
- Documenting Your Way Towards a Painless Audit
- OIG Enforcement Update: Case Studies on Who OIG is After

To RSVP, Call Bridget at 393-4600  
or visit [www.privatepractice.org](http://www.privatepractice.org)



## Calendar of Events

Friday, Aug. 15, 2008  
APPT MEDICAID/LIMHP WORKSHOP

Tuesday, Oct. 7, 2008  
APPT MINI-SERIES WORKSHOP

Friday, Oct. 17, 2008  
APPT FALL CONFERENCE (ALL DAY)

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# From the President's Desk: Building For the Next 15 Years

*Pam Feldman, MS*

When a group of therapists met at the College of St. Mary 15 years ago to help each other navigate through the confusing waters of managed care and other issues of the time, little did anyone know that what would emerge would be a viable organization with a mission that would continue to be relevant to this day.

With great foresight, they developed the three goals that continue to guide this organization:

- Advocating for providers and consumers;
- Providing support for private practice management;
- Developing and supporting legislation that enhances private practices.

APPT membership is at an all-time high of 149. The E-List has become a dynamic way for us to continue networking to meet the communication needs of members from all parts of Nebraska. There are challenges in our state because of population distribution, but the APPT Board is looking at ways to increase relevance to all members, such as the potential for podcasting our mini-practice workshops and conferences, developing sub-sets of the E-List, and continuing to host some of our workshops

in Lincoln, at Mahoney State Park, and in other central points within the state to improve access for all members.

### Legislative Impact

This will be an interesting year in the Nebraska Unicameral with a new group of state senators who are eager to learn about mental health issues. APPT members have been vocal about our needs and the needs of our clients. I would urge everyone to develop a friendly relationship with your state senator so that our causes can be heard.

Each year, APPT uses the funds that you designate for lobbying on your renewal notice so that we can have a seat on the NABHO Board and join their efforts to lobby for mental health legislation. (Members donated \$387 in 2007 towards our legislative efforts, with donations ranging from \$2 to \$70.)


If you are on the APPT E-List, you'll find updates on NABHO's work and invitations to participate in the discussion about relevant mental health issues being considered in the Unicameral.

*continued on page 3*

**KIDS INC**  
Is pleased to welcome to our practice these specialists in child and family therapy:  
Sean Haley, MS, PLMHP, NCC  
Kris Walpus, LMHP  
Jeremy Wright, MS, PLMHP  
  
[www.kids-incorporated.com](http://www.kids-incorporated.com)

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 **COMPASS**  
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Publisher/Newsletter Advisor ..... Pam Feldman, MS  
[www.PrivatePractice.org](http://www.PrivatePractice.org)

## APPT MEMBER BENEFIT: Long-Term Care Insurance

I wanted to introduce myself as the new contact person for APPT's sponsored group long-term care insurance plan. I look forward to continuing the commitment in working with APPT members.

Long-term care insurance is a strategy to help in pay for the costs associated with home-health care, assisted living facilities, adult day cares, and nursing homes. If you have been thinking about purchasing a policy or just want more information about long-term care, give me a call.

You have the opportunity to purchase this coverage at a discount through your membership with APPT. This is on top of any spousal and/or preferred health discounts you may also qualify for. In addition, this discount extends to your spouse, parents, grandparents, children, siblings, and in-laws, all between the ages of 18-84.

If you have been thinking about purchasing a policy, give me a call. Rates are based on age and health, along with how much coverage you're applying for, and whatever discounts you may qualify for. In general: the younger you are, the less you pay. Also, there is a greater chance that you'll qualify for a better health rating.

*—John Schraut is a Registered Representative for John Hancock Financial Network and is the contact person for APPT's sponsored group plan. Call him at (402)758-1313, x28, or reach him via e-mail at [jschraut@jhnetwork.com](mailto:jschraut@jhnetwork.com) or by mail at 10834 Old Mill Rd., Suite 8, Omaha, NE 68154*



## From the APPT President

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As an organization, APPT has developed a better-defined structure in the past year. Each board member has a clear role and committees have been formed to oversee certain functions, such as event programming, communications, legislation, and membership recruitment/retention. Individual members are welcome to seek appointment to any of these committees!

### Upcoming Programs

As always, we have a great list of mini-practice workshops on the calendar. On Friday, Aug. 15, we will host a special half-day program on Medicaid and LIMHP.

Our Fall Conference will be a celebration of our 15 years by having past presidents conduct seminars on topics of interest, ranging from the many types of private practice models to office staffing to finding office space to selling a practice. Regardless of your experience, there will be a wealth of information that applies to you. In addition, there will be breakout sessions with other professionals who can help us make our businesses work. We'll keep you posted.

If you keep up with the E-List, you know that there was some discussion about our relationship with the law firm of Erickson & Sederstrom. I'm happy to let you know that they are more enthusiastic than ever to continue their relationship with us. Jason Yungtum will serve as the liaison if you need to access your free consultation. He will also be presenting at our August workshop.

APPT needs you. If you aren't getting what you want from the association, revisit the ways you could get more involved. Whether it's applying for a CEU scholarship, doing peer consultation, attending a social event, or writing an article for *The Compass*, there is an abundance of ways you can benefit. **APPT is the only multi-disciplinary organization that is specifically geared towards enhancing private practice.** It is an excellent way to stay on the cutting edge.



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## *The APPT E-List: What It Is & Current Guidelines for Use*

One of the major benefits of membership in the Association of Private Practice Therapists (APPT) is access to other clinicians through the E-List. With just one e-mail, you can reach more than 140 other therapists. This is also the primary method that the APPT office uses to communicate with members.

This information was prepared by the Communications Committee of APPT to help you get the most out of your E-List use.

When you join APPT, you are automatically added to our E-List, a YahooGroups discussion listserv. The E-List is also how the APPT board of directors shares information with members about upcoming events and legislative action items. The E-List is for the use of active APPT members.

Members may use the E-List to communicate with other members — asking for resources or referrals, sharing information about groups or events, and querying other therapists on practice management topics or insurance reimbursement issues.

The current APPT policy is to allow limited self-promotion on the E-List, including advertising groups, workshops, or specific services.

There are several guidelines to follow when using the E-List in order to keep it informative and user-friendly for all subscribed.

### **Joining the E-List**

If you provide APPT with an e-mail address when you join, you will automatically be added to the E-List. If you would like to be removed from the APPT E-List, please contact Bridget at [APPT@ibc.omhcoxmail.com](mailto:APPT@ibc.omhcoxmail.com).

However, keep in mind you will not receive any administrative e-mails from the APPT office if you are not on the E-List. If you are concerned about the volume of e-mails you are receiving from the E-List, consider changing your subscription to "Daily Digest" before opting out entirely. (See next section.)

### **Managing Your E-List Membership**

Members can manage their listserv settings through Yahoo. Go to: [www.yahogroups.com](http://www.yahogroups.com) and sign in.

You will be able to select if you would like to receive individual e-mail messages, a daily digest, or "no e-mail." (If you elect "no e-mail," you will still be able to sign into YahooGroups and access the e-mail messages there, including reading and responding to posts.)

### **How Do I Know It's an E-List Post?**

You'll know a message was sent through the APPT E-List because it will have [APPTMembers] in the subject line.

### **Sending a Message**

To send a new message, you may either reply to an existing message (be sure to change the subject line) or address a new e-mail to [APPTMembers@yahogroups.com](mailto:APPTMembers@yahogroups.com). You must send the message from the e-mail address listed in our YahooGroups e-mail list (the same e-mail address where you receive E-List messages).

### **Etiquette**

*One of the biggest issues of concern is accidentally sending e-mail messages to the entire E-List instead of an individual member.* Please keep in mind that when you hit "Reply" to a message, your message will be sent to the entire E-List.

If you wish to send a message to a single member, you must change the e-mail address (replace: "[APPTMembers@yahogroups.com](mailto:APPTMembers@yahogroups.com)" with the specific e-mail address of the individual you intend to contact).

At the urging of the APPT board, we have recently switched back to an unmoderated list format, meaning e-mails are not reviewed prior to being distributed to the group. E-mails that were intended to be sent to a private recipient, or the APPT administrator, will not be intercepted, so please make sure you intend the message to go to the full group, as there is no way to "recall" the message once it's sent.

### **Clinical Confidentiality**

The APPT E-List is a quasi-public forum and therefore not appropriate for sharing any clinical or other privileged information. (While you

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**Application for APPT Scholarship For Continuing Education**

*The APPT Scholarship for Continuing Education is designed to help members defray the cost of a workshop they attend. Submit this form with a copy of the workshop brochure.*

Name \_\_\_\_\_

Practice Location \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Phone \_\_\_\_\_

Conference Title and Location (please attach a copy of brochure, if available)

\_\_\_\_\_

Date: \_\_\_\_\_ Cost: \_\_\_\_\_

I am willing to:

- Present a brief summary of the workshop at a mini-practice workshop
- Write an article for The Compass summarizing the content of the workshop.

*Please note: The maximum amount awarded is 75 percent of the cost of the workshop, up to \$100. If selected, you will be reimbursed the awarded amount after attending the workshop and sharing the information with APPT members through a presentation or article.*

**Submit completed application to: Pam Feldman, LPC  
12818 Augusta Avenue, Omaha, NE 68144 or fax to (402) 334-8171.**

Applications will be considered and a decision reached within 10 days of receiving your application.

**CLASSIFIED ADS**

**Looking for Private Practice Opportunity.** Experienced therapist seeks to join small group of therapists. (402) 390-6204.

**Peer Consultation.** APPT's peer consultation group meets on the last Friday of each month. Call Bridget at (402) 393-4600 for details.

**Want Referrals?** Establish your expertise among your colleagues. Write an article for THE COMPASS or present an APPT Mini-Series Workshop. Contact Bridget at (402) 393-4600 for details.

**Promote Your Group.** Use the APPT E-List to share information about your upcoming group or workshop.

**AUG. 8 ETHICS WORKSHOP:  
Clinical Ethics in the 21st Century:  
The Therapeutic Relationship in a  
Technologically Advanced Society**

*Presented by: Donyce L. Brenneman, Ph.D.*

Dr. Brenneman has a M.A. from Augustana College with an emphasis in medical ethics. She will speak to the challenges faced by therapists in a society where the use of technology as a means of therapeutic communication with mental health professionals has become commonplace.

This program meets the criteria of an approved continuing education program for mental health practice ethics curriculum. Certificates of Attendance will be presented for 3 contact hours.

**To register, please contact Linda at Great Oaks Counseling at (402) 932-6500 x 0, by Aug. 1, 2008.**

**Friday, August 8, 2008  
Great Oaks Counseling, LLC  
13906 Gold Circle, Suite 202  
9 am. to Noon • 3 CEUs  
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## Member News

**Greg Tvrdik, MS, LIMHP, CPC**, has opened his own office in the Terrace Plaza building at 11414 West Center Road, Suite 309. His new phone number is (402) 885-7932. The fax number is (402) 991-7942, and you can reach him via e-mail at [greg@therapy.omhcoxmail.com](mailto:greg@therapy.omhcoxmail.com).

**Marla Cohen, MS, PLMHP** was recently featured in a profile in *Metro Magazine* ([www.metroomagazineomaha.com](http://www.metroomagazineomaha.com)).

Marla has been a professional psychotherapist and Nationally Certified Counselor since 2000, after obtaining her Master of Science in Counseling from UNO. Her practice includes individual therapy, couples counseling, children, and geriatric patients.

**Jack Dross, MS, LMHP** will officially begin practicing at Kairos Psychological PC as of Aug. 1. Dross was formerly affiliated with Kid's Inc. His new phone number (after Aug. 1) will be (402) 334-6869.

Kids Inc. is pleased to announce a series of Play Therapy Education and Technique Workshops for medical professionals and educators in the Midwest.

With office locations in both Omaha, Nebraska and Overland Park, Kansas, Kids Inc. specializes in child and family development through extensive use of Play Therapy (PT) techniques. Kids Inc. Director and Founder, **Allan Gonsler**, a leading expert in PT and registered Play Therapist Supervisor, launched the bi-monthly workshops in April. For details, call (402) 330-4014.

Kids Inc. recently welcomed three new therapists to the Omaha staff: **Yeshim Oz, MA, MS, PLMHP**, specializing in children's Special Education, ADHD, and academic tutoring; **Kris Walpus, LMHP**, specializing in play therapy with emphasis on attachment, anxiety, ADHD, trauma, adoption, and foster issues; and **Jeremy Wright, MS, PLMHP**, specializing in adolescent depression and anxiety, foster care, and reunification issues.

Do you have member news to share with your colleagues? Offering a new specialty? Featured in the media? Started a new group?

E-mail [appt@ibc.omhcoxmail.com](mailto:appt@ibc.omhcoxmail.com) (subject line: Member News). \*



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**Space is limited, so respond today to Michael Harsh, LMHP  
at (402) 932-6500 ext. 3.**

# APPT E-List Guidelines

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must be a member of APPT to be added to the E-List, we cannot control if these messages are forwarded to non-members; therefore, please be mindful of what you post.)

## **Collegial Learning — But Not Supervision Or Consultation**

Members are encouraged to access the listserv for resources and to ask questions relevant to other subscribers. However, the APPT E-List is not appropriate for supervision or consultation.

## **APPT Membership Requirement**

You must be an active member of APPT to utilize the E-List, as this is a benefit of membership in the organization. Messages posted on behalf of non-members must be approved in advance by the APPT Board of Directors. Submit inquiries to: [APPT@ibc.omhcoxmail.com](mailto:APPT@ibc.omhcoxmail.com).

When using the E-List, please keep in mind that others may be trying to manage the multiple listservs they participate in. Please title each e-mail discussion appropriately:

[AD]: for a group, seminar, or training you would like to share with others, including the location. For example, a new DBT group in Fremont would be titled "New DBT Group-Fremont."

[RESOURCE]: Information that may be of use to the general listserv again including a brief description. For example, "Free Ethics CEUs in Lincoln."

[BULLETIN]: will describe an update from APPT

[LEGISLATIVE]: will mean any legislative updates which are generally provided by the Legislative Committee of APPT.

Please be sure to change the subject line if you are starting a NEW discussion topic.

If you are looking for specific information that may be of limited interest to other members, please ask that responses be sent to you directly — and be sure to include your e-mail address in your post.

Members posting on the E-List are encouraged to always put their name and contact information on their contributions. You may not be easily identified by the e-mail address associated with your account. If members "reply" and do not give their name, the other members do not know who sent the reply. It's always nice to know who contributed — and facilitates the "networking" purpose of the E-List.

## **Direct Concerns or Questions to APPT**

Any concerns, suggestions, or questions about the E-List should be directed to any board member or to [APPT@ibc.omhcoxmail.com](mailto:APPT@ibc.omhcoxmail.com) instead of directed to the E-List.

There is a listing of board members and their contact information on the APPT website, [www.privatepractice.org](http://www.privatepractice.org).

You can also call Bridget at (402) 393-4600 if you have questions.

## **Free Legal Consultation for APPT Members.**

Each Traditional APPT member is entitled to a free legal consultation with an attorney from Erickson & Sederstrom, P.C. (up to one hour) per year.

Contact Bridget at the APPT Office at (402) 393-4600 for access information. If you use this service, please give us feedback.

Call Bridget at the APPT Office at (402) 393-4600 for details!

# THE MEDICINAL INQUIRER



In this new column for *The Compass*, private practice therapists can learn more about psychiatric medications and get their questions answered.

By Joyce Sasse, APRN

This column is devoted to answering questions about the why's and wherefores of the arcane subject of psychopharmacology.

This engrossing field is chock full of information that can expand your knowledge, improve your understanding of your clients, and help move your practice up another notch in an already competitive field.

**Question:** Why do I need to know about psychiatric medications?

**Answer:** Many patients who seek out a therapist have already been placed on medication by their primary care physician. You may want to know more about the medications or these patients may ask you questions about their medications.

While you cannot give a medically expert opinion about the medication, you certainly look informed if you at least know what the medication is and what it is used for. If the medication is an obscure one, you can always look it up on the Internet and get the information for the client.

At a recent conference, a nationally noted speaker, Dr. Nasrallah, told the audience that 85% of the disorders in the DSM IV-TR did not have medications specified for treatment and that the majority of medications in psychiatry are used "off label." I will attempt to inform you, my gentle readers, whenever possible, if I am referring to "labeled" (FDA-approved) or "off label" use of specific medications.

## About Antipsychotics

Novel antipsychotics represent the newest group of medication used to treat the psychotic disorders. Beginning with the discovery of Clozapine, they represent a break from the heavy side effects of the conventional antipsychotics like Thorazine, Navane, and Haldol.

The novel antipsychotics have less sedation, less cognitive slowing, and fewer neurological side effects than the older conventionals. They are nonaddictive and, with careful use, represent a breakthrough for the careful prescriber in the care of patients. In addition, the novel antipsychotics have neuroprotective factors that protect neurogenesis (the ongoing formation of new brain cells).

Some of the novel antipsychotics are not just for psychosis anymore. In low dosage, Risperdal 0.25-0.5 and Seroquel 1.25-25 mg can also be used to treat anxiety.

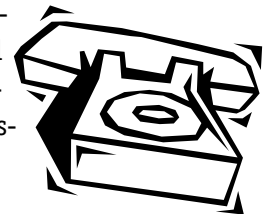
In clients who are failing on antidepressant medication, the addition of Risperdal or Abilify can sometimes bring the patient into remission. Risperdal has a strong 5 Ht 2 effect that raises serotonin and Abilify works to enhance the effect of dopamine.

Abilify, Invega, Risperdal, and Seroquel all can be used to manage the manic stage of bipolar disorder, and all but Seroquel can be used in maintenance for bipolar disorder.

Seroquel is very sedating and, at times, it has been used off label as a sleeping agent as well as for its other uses. Seroquel is an expensive medication with a hefty side effective profile compared to other nonaddictive sleeping preparations such as Benedryl.

— Joyce K. Sasse, MS, APRN-BC, CARN is a psychiatric nurse practitioner and clinical nurse specialist with Woodhaven Counseling Associates in Omaha.

Please send your questions about psychiatric medications to **The Medicinal Inquirer** and I will endeavor to answer them to your satisfaction. E-mail [joyesse1@cox.net](mailto:joyesse1@cox.net) with your questions or call me at (402) 592-0328.



**Joyce K. Sasse,  
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Psychiatric Nurse Practitioner  
Clinical Nurse Specialist

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Omaha, NE 68137

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Fax: (402) 592-4170

## AN EXCELLENT PRACTICE: Money Issues in Private Practice

*This is the final installment in a five-part series of articles that have, hopefully, provided you with a number of practical ideas to incorporate on a regular basis into your practice. The goal is to build a stronger practice, even an excellent practice. Marketing a Private Practice, Working with Clients, HIPAA, and Computers have been covered—Money Issues in Private Practice will be broached in this final part of the series.*

By Robert G. Kraft, Ph.D.

Ah, Money. What an issue. Given that I have worked with many different practitioners in their offices (I developed and trained practitioners and their employees with billing software for many years), I have seen a myriad of ways that clinicians and their staff go about getting paid for their services. It is probably safe to say that there is no right way or perfect way to deal with money, so the intent here is to have you think about some aspects of acquiring the money for your work as a therapist.

Money is a powerful issue that many people never talk about to anyone. Whom do you talk to about money? Money causes problems, it buys stuff, and it is envied when someone else has more of it.

If you are not clear about money, how will your patient be able to talk to you about it? — whether the subject is his/her bill with you or other aspects of money, such as their greed, foolishness, etc.? How to spend money is also an issue that is very personal and often not talked about.

Perhaps you leave it up to someone else (the front office staff) to deal with money. This works well in many situations, but will not cover everything.

How you deal with your patients and money is a part of your theory as a practitioner, whether you have thought about it or not. If someone is consistently late in paying, is that a therapeutic issue — or a front office issue — or both? Are you willing to talk with your patients about money issues? If not, why not? Are you worth it?



Even if you have office personnel that are handling collecting the money and sending out the bills, what is your part and what do you think and how do you feel about addressing it in therapy? If you are unsure about your answer(s), it might be good to talk with another therapist about your uncertainty.

Do you see patients and not know if you will be paid? Or do you specifically state your charge and make arrangements for payment? If you do not state your policy in the beginning, do you still feel ok about not being clear about payment when they are gone and owe you money? Does it make sense that you could be clear up front, see people for what you charge, and if that doesn't work out, you could then make a plan that is agreed on with you and your patient (say a reduced fee)? So do you do that? Or do you not talk about it and have feelings later?

Do you allow patients to owe you? How big of a bill do you allow? That would seem to be your issues, not theirs. Do you avoid thinking about it and say to yourself (or out loud) that it is their doing, that they are responsible for not paying? But do you forget that you kept seeing them and not bringing it up, not looking at it?

Is that what therapy is about, putting off issues until another time?

Using a collection agency is a very tricky issue because it doesn't work very well, if at all. I have been told by collection agents that if you don't acquire what is owed you within 60 days, you're not going to get it (that may be an exaggeration — sometimes old, owed money comes in, but it is rare). I have also been told (by an attorney/psychologist) that one of the main things that instigates a lawsuit against a therapist is when the old balance is sought aggressively; that is, when you send a patient to collections. It is a better idea to take other action earlier in the process.

Here are some ideas about how you could be in private practice, facing money issues. You could make it a habit to tell the patient your fee up front, help him/her to be informed about his/her insurance (for example, to make sure the patient knows that they are responsible for the total bill, and insurance doesn't always pay, etc.), don't allow balances to accrue beyond a certain level (say \$500) without being looked at in the therapy, think about how you handle money issues (particularly the areas that don't feel good to you — "not feeling good about it" is telling you something), and talk with a colleague when you are in doubt or are struggling with an aspect of money issues in the therapy.

Here are some specific actions to consider:

In the initial phone call, state your fee and indicate that you expect payment in full at the first session unless they find out something different is

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**Association of  
Private Practice Therapists**  
P.O. Box 241621  
Omaha, NE 68124-5621  
**402.393.4600**  
[www.privatepractice.org](http://www.privatepractice.org)

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## **BOARD OF DIRECTORS**

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**Psychology Liaison** ..... Shari Connor, Ph.D.  
**Social Work Liaison** ..... Julie Luzarraga, LCSW  
**Counseling Liaison** ..... John Atherton, MS  
**Marriage & Family Liaison** ..... Sherry Hubbard, MS

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**Address Service Requested**

## **Effectively Addressing Money Issues in Private Practice**

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owed from their insurance company (if they are Medicaid or Medicare, do not say this).

Patients that come prepared to pay for services realize *that they are going to have to pay for services*, and they often do so. People that have trouble paying for services up front often don't pay at all or incompletely. As for the patient that doesn't come to see you because he or she doesn't really want to pay — do you really want to see him/her?

There are always exceptions: a patient had been forced to separate from her home and couldn't get check blanks for a few weeks — by the second session, I was a little concerned. Possibly because the issue was addressed briefly in that session, she brought a check the third session and cleared her balance.

Only extend credit (“would you like me to send a bill on a monthly basis?”) after they have paid consistently a few weeks; they have shown you they pay for services.

When any patient's balance breaks \$500 and they have not paid their portion of the balance (not what is owed by insurance), then the situation is reviewed — if the patient is not paying, he or she is asked to pay what he/she owes.

When someone has stopped treatment and owes a balance and hasn't paid after two statements, a friendly but professional call asking if she/he could pay will often nudge the patient to put a check in the mail. Of course, this works best with patients who paid all along (she/he paid regularly during the treatment). One phone call can prompt him/her to stop ignoring the statement and send the final balance.

Therapy, no matter what “brand” you espouse or use, is looking at what one thinks and feels and how one acts. Can you do the same about the money issues between you and your patients?

— Robert G. Kraft, Ph.D., has been in private practice in Omaha for over 20 years. He founded Kairos Psychological, P.C., 15 years ago, has developed billing software for therapists that is sold nationwide, and continues his personal training in psychotherapy practices at the rate of eight hours or more per week. He is on the Executive Committee of the Center for Psychotherapy and Psychoanalysis and is an Associate Clinical Professor in the Department of Psychiatry at Creighton University School of Medicine.