

# Understanding Your Psychiatry Visit Bill

## Why your visit may include multiple charges.

Our goal is transparency and trust in your care. We know medical billing can be confusing, so here's what your psychiatry visit charges mean. A single visit can include medical care and therapy. To meet insurance billing rules, these are listed as separate line items—even though they happen in one appointment.

### 1. Office Visit/Evaluation (CPT 99213-99215)

This covers your provider's medical evaluation and management of symptoms, medication and overall treatment plan.

### 2. Psychotherapy (CPT 90833, 90836, or 90838)

If your provider spends time offering talk therapy, coping strategies, or supportive counseling during the same visit, this is billed separately as psychotherapy time.

### 3. Screening Tools (e.g. PHQ-9 or GAD-7)

You may see a small charge for standardized mental health questionnaires. These tools help track progress, guide treatment decision, and meet quality-of-care standards.

*Additional services provided during your visit may appear as separate charges.*

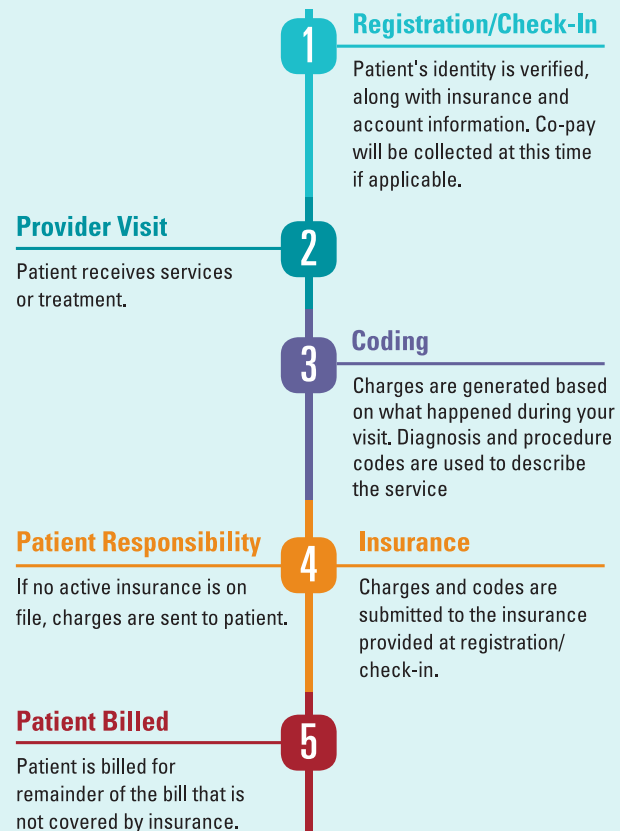
## Why these components matter.

- Keeps a clear record of the care you receive
- Helps your insurance understand and pay for your visit properly
- Ensures you get complete mental health support—both medical care and counseling

## Know what your insurance covers.

We get it, healthcare insurance can be confusing. That is why we strongly recommend calling your insurance provider (number on the back of your card) or visit their website to make sure you understand what your plan covers during a psychiatry visit. It is the best way to avoid a surprising bill later.

## How billing works



## Terminology

**Deductible**—the amount you owe for covered health care services before your health insurance or plan begins to pay.

**Co-insurance**—your share of the costs of a covered health care service, usually calculated as a percent of the allowed amount for the service. You start paying co-insurance after you've paid your plan's deductible; if applicable. For example, your specific insurance plan is 80/20. As a patient, you will pay 20% of the bill once your deductible is met.

**Co-pay**—a fixed amount you pay for a health care service, usually when you receive the service. For example, your insurance plan requires a fixed amount of \$25 at the time of the office visit. This will be collected at the point of checking in for your appointment. Depending on the plan, this amount may vary by type of services/treatments provided.

## MANKATO CLINIC PATIENT FINANCIAL SERVICES

For payments and billing questions please call: 507-389-8507 | Toll Free: 800-657-6944

Online Bill Pay: [mankatoclinic.com](http://mankatoclinic.com) | For estimates call 507-389-8631.

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