



December 31, 2018

The information provided is a price list of charges for inpatient services and, where relevant, outpatient charges. The below is not inclusive of all services provided by a community mental health center. These are the standard charges submitted to insurance. However, the listed charges do not inform you, the consumer, about your financial responsibility or about the range of professional services you might receive while in treatment. Financial responsibility for services rendered are determined based on individual health plan details. You may also qualify for our financial assistance program. To speak with someone about the specific costs of your care or to inquire about the financial assistance program, please contact 574-722-5151.

Inpatient Psychiatric Facility room and board (per diem): \$1,156

Laboratory charges: *There is no standard charge for laboratory services, exact cost is submitted to insurance*

Pharmaceutical (medication) charges: *There is no standard charge for pharmaceutical/medications provided during your inpatient stay, exact cost is submitted to insurance*

During the course of your care on our inpatient psychiatric facility, a range of professional care services by our psychiatric team will be provided and billed separately from standard hospital charges

Below is a listing of the most common professional services rendered. It is not inclusive all services provided by Four County. For any professional service rendered on an outpatient basis, the consumer's responsibility is subject to the terms of their insurance plan.

Professional Services (charge per service/unit):

Inpatient~

Psychiatric Evaluation \$160-\$232 based on service coding

Psychiatric Rounds \$50-\$132 based on service coding

Outpatient~

Initial Intake Assessment \$150

Individual Therapy (30 min) \$65

Individual Therapy (45 min) \$100

Family Therapy with client \$100

Family Therapy without client present \$85

Group Therapy \$32-\$60 based on service coding

Psychiatric Evaluation \$160-205 based on service coding

Medication Clinic visit \$45-\$90 based on service coding

Outpatient facility charges: \$135 **Note that in some cases outpatient professional services will have an accompanying facility charge. The individual consumer is not responsible for facility charges.**