

## Dayna W Sharp, LCSW

### FEES

I am an on-out-network provider, meaning that I do not work directly with managed care companies, though some clients will request receipts and receive reimbursement themselves from their insurance company. To find out if you have out-of-network benefits, please call your insurance company.

Why don't I accept insurance? This is an important question. When a psychotherapist works under the umbrella of a managed care corporation, there must be a DSM-V diagnosis, a treatment plan and many will soon require outcome measures—all to determine whether or not the corporation will cover the cost of care. Managed care companies also require psychotherapists to utilize specific modalities of therapy, usually short-term in nature.

First, a DSM-V diagnosis serves to put a label on a collection of symptoms. Many leaders in the field of psychiatry, psychology and clinical social work have reservations regarding its validity and generalizability. In other words, consumers of psychotherapy are more than a particular constellation of symptoms. And many—including myself—believe that labeling people who are already suffering is unnecessary and unhelpful.

Second, while I believe that short-term, symptom reduction-focused therapy can be helpful at times, I do not believe this is true for everyone (and there is significant research to support this). As a clinician, I prefer to have the flexibility to utilize a truly relational and client-centered framework, rather than working from the confines of managed care.

Third, consistent with my client-centered focus, I believe that clients have the ability to determine whether a therapy is working for them. I prefer to give my clients this power as opposed to providing outcomes to a third party.

Finally, I respect confidentiality. DSM-V diagnoses, treatment plans and even psychotherapy notes can be viewed by managed care personnel when receiving therapy from a managed care provider. As an out-of-network provider, your private information will be seen exclusively by myself and any other provider to whom you request. Of course, I am still bound by my legal and ethical obligation to report child abuse, suicidality and homicidality as would any therapist.

The good news: The good news is that I am able to offer a sliding scale fee, sometimes as low as a typical co-pay. My fee ranges from \$50-\$150 per session. Ideal effects of psychotherapy are reached with weekly therapy. A helpful way to think about this is as follows: At \$50/week, one pays a little over \$2000 a year. At \$100/week, one pays a little above \$4500/year, and at \$150, one pays about \$7000/year.

Remember that some clients will benefit from therapies lasting six months or less, while others may benefit from several years. This is a decision that is made between both the client and therapist, and of course, expected length of treatment will shape the fee.

I'll also leave you to think...Many people spend thousands of dollars a year on leasing a car, carrying a cell phone or going out to eat. My first task as a therapist: I dare you to imagine what your investment in your mind, body and relationships will bring!

