



Cost Estimate for a Stay on the Psychiatry and Behavioral Medicine Unit

Information about cost and in-network versus out-of-network coverage for a stay on the Psychiatry and Behavioral Medicine Unit.

What are the estimated charges for my child to stay on the Psychiatry and Behavioral Medicine Unit?

Facility charge

The daily facility charge for patients on the Psychiatry and Behavioral Medicine Unit ranges from \$6,400 to \$7,000. This charge includes all nursing, meals, room, staffing, mental health therapy, groups, parent education, and crisis and discharge (going home) planning.

Professional charge

Patients also are charged a daily professional charge that ranges from \$270 to \$550 for attending physician or nurse practitioner services. This charge depends on how complex the service is that they provide.

If your child has consultations from other medical services while in the Psychiatry and Behavioral Medicine Unit, there will be additional professional charges for those services.

Medications, diagnostic tests and rehabilitation therapy

These costs vary and are all separate and additional charges.

How long can I expect my child to stay on the Psychiatry and Behavioral Medicine Unit?

Most patients stay for 3 to 5 days. However, some hospital stays may be shorter or longer. The length of stay depends on:

- Your child's symptoms
- Your child's progress toward goals in their treatment plan
- If your child will benefit from or improve from staying in the hospital longer

Once critical inpatient care is no longer medically necessary, we will send your child home or to a less restrictive treatment setting, such as psychiatric residential treatment.

What does in-network versus out-of-network insurance mean?

If you have insurance that **includes** Seattle Children's Hospital as a provider ("in-network") on your plan, you will pay a daily copay or coinsurance percentage after you meet your deductible.

If you have insurance that **does not** include Seattle Children's as a provider ("out-of-network"), you will pay most or all of the cost for an inpatient stay. Also, deductibles are usually much higher for out-of-network admissions.

To Learn More

Psychiatry and
Behavioral Medicine
206-987-2164

Free Interpreter Services

- In the hospital, ask your child's nurse.
- From outside the hospital, call the toll-free Family Interpreting Line 1-866-583-1527. Tell the interpreter the name or extension you need.

If Children's is out-of-network for my insurance, but there are no openings in an in-network inpatient psychiatric unit facility, what happens?

Your child may be admitted to our Psychiatry and Behavioral Medicine Unit from the emergency department because there are no beds available that day in an in-network facility. When this happens, usually the insurance company will make a special agreement to cover the days a patient is admitted to Children's because there is no bed available at an in-network facility.

Insurance companies may expect your child to transfer to an in-network facility as soon as a bed becomes available, which might be the next day or so after admission. Insurance will not cover costs at Children's if there is an opening at an in-network facility.

Children's is out-of-network for my insurance, but I still want my child to come here. How much will I have to pay?

Some insurance plans do not have an out-of-network benefit for inpatient mental health services, and you will have to pay all of the costs for admission to the Psychiatry and Behavioral Medicine Unit.

However, some plans offer some coverage for out-of-network services. For example, if your insurance pays 50% of charges, then you could expect to pay at least \$3,500 or more for each day. This is after you pay your annual deductible, which also could be thousands of dollars. Insurance will not pay for any services until you meet your annual deductible.

If you choose to admit your child here even though we are out-of-network for your insurance, we will contact you to pay your out-of-network deductible and out-of-pocket maximum within 2 business days after your child is admitted. An out-of-pocket maximum is the amount you pay each year before your insurance will pay 100% of their rate for the service.

To avoid high out-of-pocket costs, we strongly recommend you get care for your child at a facility that is in-network for your insurance plan. Also, Children's Financial Assistance Program cannot cover costs for choosing Seattle Children's as an out-of-network provider.

Are these estimates exactly what I will pay?

These estimates are not a guarantee of the final price. Children's will not be held liable for the final bill to match the estimate. We provide this so you have information to make the best decision for your family.

We cannot know in advance the type and amount of care you and your provider will decide is needed. Your charges will depend on the actual services you receive.

Seattle Children's offers interpreter services for Deaf, hard of hearing or non-English speaking patients, family members and legal representatives free of charge. Seattle Children's will make this information available in alternate formats upon request. Call the Family Resource Center at 206-987-2201.

This handout has been reviewed by clinical staff at Seattle Children's. However, your child's needs are unique. Before you act or rely upon this information, please talk with your child's healthcare provider.

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