

**CLINICAL CARE POLICIES - ADMINISTRATION  
PAYMENT POLICY  
MASONIC CENTER FOR YOUTH AND FAMILIES  
POLICY NUMBER: 13  
Created: September, 2010  
Adopted: December 16, 2010  
Revised: January 14, 2025**

## STATEMENT OF POLICY

The purpose of this policy is to establish the Masonic Center for Youth and Families' (MCYAF) payment policy for services rendered. Clients without the means to pay full fee for services or are without insurance, are eligible to apply for a reduction in fees. Reasonable efforts will be made to establish fees for families given that family's particular circumstances. When available, MCYAF will bill individual insurance or support clients to seek reimbursement from their own insurance.

## PROCEDURE

1. MCYAF fees shall be reviewed and established annually as part of the budget process.
2. Clients and their families or guardians will be given information about MCYAF's fees and its sliding scale during the client's initial intake appointment. Clients must complete a credit card authorization form to securely store their preferred payment method with Square. If a client doesn't have a credit card, they can pay cash at the time of session. All clients will be made aware of the 24 hour cancellation policy.
3. Reduced/Sliding scale fees may be established in the following manner:
  - Clients seeking a reduction in fees (sliding scale fees) may submit financial information that establishes the family's household income. Such information may, where reasonable, be limited to the most recently filed and due federal income tax return applicable to the household.
  - The Intake Coordinator shall be responsible for collecting financial documentation submitted. Financial information shall be maintained and stored in the EMR.
  - Upon review, the Director of Operations may reduce the standard fees for services and establish a sliding scale of fees. The sliding scale fee shall be reviewed and adjusted as applicable on an annual basis based upon current financial information provided by the client/family/guardian.
  - Clients seeking discounted fees beyond the sliding-scale fees may be required to provide MCYAF with additional supporting documentation (e.g., authorization for a credit check, details about expenditures and bank statements for the prior three (3) months, etc.) The Director of Operations will review the supporting documentation and will make a determination.
  - Should the individual dispute their ability to pay the additional discounted fee, an appeal may be made. All appeals will be reviewed by the Executive Director in coordination with the Director of Operations.

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- Per *Health and Safety Code 124260 (d)* in situations where a minor 12+ has consented to treatment on their own, the minor's parent or guardian is not liable for payment unless the parent or guardian participates in the mental health treatment, and then only for services rendered with the participation of the parent or guardian. Should the minor be able to pay for services, collecting a reduced fee may be clinically appropriate. In instances where the minor is unable to pay, the fee will be waived. A reduction in the fee will be determined by the Executive Director and the Director of Operations.
4. MCYAF shall provide families with invoices detailing the services that have been or will be provided. See *No Surprise Act*.
  5. Clients are expected to pay for services at the time they are rendered. Individuals and families with outstanding balances will be notified as followed:
    - Clinicians may ask for an exception based on temporary extreme financial hardships. Consultation will include the Executive Leadership team. Payment plans to be determined as needed.
  6. Automated Payments and Cancellations
    - If a client late cancels or no-shows outside the cancelation policy of 24-hour's notice, their payment form on file will be charged.
    - If a client's credit card is declined, services will be paused until an updated form of payment is on file. Payments for completed sessions, late cancellations (within 24 hours), and missed appointments will be processed automatically the day after the client's appointment.
  6. Reasonable extensions for payment will be given based upon a temporary change in circumstances. Continued and/or chronic late payment or non-payment of fees will be grounds for termination of treatment as detailed in Termination of Care Policy.

REFERENCE:

California Health and Safety Code Section 1204.1.

California Code of Regulations, title 22, section 75331 (b)(2).