

If you want to see a licensed professional like myself **with the couple, itself, as the client** – you will have joint equal rights, but it will be *self pay*.

Why?

Third party payers are contracted to pay for *A client*, and the record file is under an *individual name, who owns that record of service*.

Medical Insurance does not pay for ‘Marriage Counseling’, as there is *no client who is a patient with a medically necessary condition with a diagnosis*.

They usually, **but not always**, pay for ‘couple or family therapy’, if there is an outpatient mental health benefit: however any managed care authorizations, deductible, co-pay or co-insurance would still apply as for any *individual service*.

EAP ‘Employee Assistance Program’ benefits, not being medical insurance, **do not** typically have any ‘medically necessary’ criteria, and are flexible about what services are provided and who is present, but there needs to be an identifiable client for billing and the record of service, and always have to be preapproved to the named individual. It might be a few to several sessions, but are limited.

Under either Medical Insurance or EAP, the named individual client can always continue services individually with or without the partner, but the partner has no such rights: make sure if one party is more interested in the services, or might need both type of services, that that one is the client that calls and contracts for services!

Without a third party payer, both partners *can* be ‘the client’ with joint/equal rights, but then both are responsible, jointly, for the services and own the record: and it is payment at the time of services (if there is any legal battles or litigation, the contract makes it clear I do not do any services involving court – e.g. custody evaluation, etc.) This counselor / therapist would also have little responsibility to either party for their individual clinical needs outside of the marital context.