



Private Behavioral Health Care vs. Public Behavioral Health Care

What is Private Behavioral Health Care?

A private behavioral health care provider will have their own private practice or work in a hospital or practice with other doctors. In private practice, a provider will typically accept insurance or out-of-pocket payments and are not required to accept public health insurance like Medicare or Medicaid (and most don't.)

What is Public Behavioral Health Care?

Public health care refers to health services that are publicly funded, usually by the state or federal government. Public health services are typically offered on a sliding scale, meaning that patients pay what they can afford. Public health providers also usually accept public health insurance like Medicare and Medicaid.

Public health care exists to make **healthcare more equal and accessible**. The goal is to ensure that all people receive care, even if they don't have insurance or can't pay everything out-of-pocket.

The Benefits of Public Behavioral Health Care

forward, together.

Reduced Cost

Public health care organizations like CSBs accept public health insurance like Medicaid and Medicare. They also will work with clients paying out-of-pocket to get them the services they need at a cost they can afford.

Accessibility

There's a huge problem with accessibility to health care in the U.S. Many people live in rural areas and have to travel a town or two over to get care. Many times, not owning a car or a lack of public transportation in the area will keep people from getting the care they need.

