

FINANCIAL AGREEMENT

Fees for professional services are charged as follows:

Initial evaluation — \$110 for a 45-minute session; Individual 45 minute therapy sessions for adults and couples — \$110; Group Therapy--\$50 per Group session. Often a portion of the charges is reimbursable under an insurance policy. This office will file or assist you in filing for your insurance benefits at no additional charge. You are ultimately responsible for payment of all charges on your account even if your insurance company denies the claim or otherwise refuses to pay the charges, unless I have signed an agreement with your insurance company stating otherwise. Please verify your coverage and note restrictions or limitations.

A 24-hour notice is required for cancellation of appointments so that hour can be rescheduled. If you fail to cancel within the allotted time or miss your appointment, a charge of \$50.00 will be made for the session. These charges cannot be filed to an insurance company.

No charge will be made for brief telephone calls, but calls about treatment issues that last 10 minutes or longer will be billed at the regular therapy rate. Most insurance policies do not cover telephone therapy.

There will be a \$25.00 charge for all returned checks. You are responsible for these charges.

Payment is required at the time of service for the portion of your bill, usually referred to as your co-payment, not covered by insurance. Many insurance companies have deductibles that must be met before they begin to pay for services. You are responsible for your yearly deductible as well as the co-payment.

A service charge of 18% APR will be added to bills that are 90 days past due. If you fail to settle your account, it will be referred to a collection agency and you will be charged for the additional cost of collection, approximately 33 1/3% of the balance due plus court costs.

I have read the above and accept treatment under these terms.

Date: _____

Signature of Person Responsible for Payment