Good Faith Estimate

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Client name: Date of birth: Date of estimate: Valid through: Diagnosis to be determined.

About this estimate
Under the federal No Surprises Act, clients who are uninsured or not using insurance have the right to a written estimate of their expected costs before services begin. This estimate gives you a clear sense of what to expect and explains your rights if a bill comes in higher. Beyond regular sessions, a couple of other charges can come up during treatment, including but not limited to:

- A late cancellation fee which applies when a session is cancelled with less than 48 hours' notice ($200 for individuals, $235 for couples and relationships)
- A missed appointment fee which applies when you do not attend a scheduled session and have not let me know beforehand ($200 for individuals, $235 for couples and relationships)

What this estimate does and does not include
How long therapy lasts and how often we meet varies from person to person, so I can't say at the start how many sessions you'll need. We'll decide that together as we go. The figures below are a projection only. They are not a contract and don't obligate you to any number of sessions. They don't include unexpected costs, such as longer or extra sessions, and they show my full fee without any out-of-network insurance reimbursement, so check with your plan about coverage. If we meet less often than expected, your total may be lower.

Expected services and charges
Sessions are 50 minutes, typically once a week, billed as individual psychotherapy (CPT 90834) or couples therapy (CPT 90847), with modifier 95 for telehealth. This estimate covers six months of weekly sessions (26 sessions). You're free to stop sooner or continue longer, and if we continue past six months, I'll provide an updated estimate.

- Individual psychotherapy, 26 sessions. Total cost = $200 x 26 = $5,200
- Couples therapy, 26 sessions. Total cost = $235 x 26 = $6,110

Disclaimer
This estimate reflects the services I reasonably expect to provide, based on what I know today. It does not include unknown or unexpected costs. If you are billed more than this estimate, federal law gives you the right to dispute the bill. You can contact me to let me know the bill is higher than the estimate and ask me to update it to match, negotiate it, or ask about financial assistance. You can also start a dispute resolution process with the U.S. Department of Health and Human Services (HHS) within 120 calendar days (about 4 months) of the date on the original bill. There is a $25 fee to use this process. If the reviewing agency agrees with you, you'll pay the amount on this estimate. Otherwise, you'll pay the higher amount. Starting a dispute will not affect the quality of care you receive from me.

To learn more or get a form to start the process, visit www.cms.gov/nosurprises or call 1-800-985-3059. Keep a copy or photo of this estimate in case you need it later. A printed copy is available on request.