

Transitions Therapeutic Services, LLC Fee Schedule and Financial Policy

Instructions: Please complete the form below prior to your first visit and send it via fax to 301-341-2233 or email to snichols@transitionstherapy.com. Send correspondences with Attention to Transitions Therapeutic Services.

FEE SCHEDULE

Initial Intake Session	1 hour.....\$150 (one time fee)
Individual Therapy	50 minutes.....\$80.00/per session
Group Therapy	1.5 hours.....\$45.00/per session
Marital/Couples	1 hour.....\$100/per session

PAYMENT POLICIES

1. Co-payment is due at the beginning of each session.
2. Insurance is accepted as a form of payment (BC/BS, Aetna, NCPPO, MHN, any PPO/POS).
3. Payments can be made by cash, check or money order.
4. There will be a \$25 fee on any returned check in addition to the full payment.
5. The client is responsible for any fees not covered under your insurance. You will be billed separately.
6. Clients must cancel within 24 hours or you will be charged full fees. Exceptions may be made in cases of emergency.

I have read and understand all of this information. I agree to all of the above terms and procedures.

Client's Printed Name

Client's Signature

Witness

Date