

METRO NY DBT CENTER

ADMINISTRATION POLICIES

SERVICES

Following a phone screening and initial assessment, the appropriate treatment will be recommended and may include: individual therapy, family therapy, group therapy, skills training, parenting skills, pharmacology, as well as any combination of the above.

Telephone calls exceeding 15 minutes in length are charged as individual therapy sessions, with the additional time being pro-rated based on the session fee. Consultation with other treatment providers will follow the same procedure. Coaching calls - Generally, coaching calls should not exceed 15 minutes. In the event the call exceeds 15 minutes, depending on the focus of, and need for, the coaching call, fees may be waived.

Fees are subject to change. You will be provided with 30 days notice if there is a change in fee.

PAYMENT

Payment is expected in full at the time of service unless other payment arrangements are made in advance.

Cash, money order and check are accepted.

Outstanding balances will accrue an interest charge of 1% per month if greater than 30 days. Accounts over 90 days delinquent may be submitted to a collections agency and clients will be responsible for all reasonable collection fees and interest.

There is a charge of \$25 for checks returned due to insufficient funds.

INSURANCE

This practice does not participate on any insurance panels. Many insurers that offer an out-of-network benefit will reimburse for services received. Monthly billing statements will be provided for submission to your insurance company.

While you may be assisted in submitting the proper forms to assist with reimbursement, please be reminded that you are ultimately responsible for any fees incurred at the time services are rendered.

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APPOINTMENTS

Please arrive on time for your scheduled appointment.

If you must cancel an appointment, you must provide **ONE BUSINESS DAY'S** notice (24 hours in advance). We reserve the right to charge you your usual session fee if you do not provide **ONE BUSINESS DAY'S** (24 hours) notice. If you must cancel on short notice, please communicate this as soon as possible.

Please refer to the Cancellation policy for further information.

AGREEMENT

By signing below, you acknowledge that you have read, understood and agree to abide by the above policies.

Print name

Signature