Client:Jane DoeProvider:Jessie RismanProvider License:LPC-MHSP (temp) #XXXX

Good Faith Estimate for Services

GOOD FAITH ESTIMATE FOR HEALTH SERVICES

The No Surprise Act went into effect on January 1, 2022, which lends you, the client, the right to a *Good Faith Estimate* inclusive of the fees for your therapy. This Act applies to clients who are uninsured or choose to self-pay for their therapeutic services.

PROVIDER INFORMATION

Jessie Risman, LLC Jessie Risman, MS, LPC-MHSP (temp) 1305 16th Avenue South, 3rd Floor, Nashville, TN, 37212 Phone: 615-649-4233 Email: jessie@jessierisman.com NPI: XXXXXXXXX EIN: XX-XXXXXXX

CLIENT INFORMATION

First Name: Jane Middle Name: Mary Last Name: Doe Date of Birthday: XX/XX/XXXX

CLIENT DIAGNOSIS

Many people come to therapy without a formal diagnosis of mental illness. Many come for help adjusting to life circumstances, to discuss challenges and problems that may affect their social, occupational, relational, or educational functioning, to talk through decision-making, or examine patterns in relationships, process feelings, etc. However, the *Good Faith Estimate* requires providers to issue a diagnosis for all clients. For these reasons, below you will find your *Good Faith Estimate* diagnosis:

Diagnosis: Z71.9 - Counseling/Consultation, Unspecified

This diagnosis is listed to satisfy the Federal requirements of the No Surprise Act and Good Faith Estimate mandate. This is NOT a formal psychological diagnosis. Formal diagnoses are determined by assessments and other clinical criteria. It is within your right to decline a formal diagnosis per State and Federal guidelines. This will not interfere with your current or future treatment.

WHERE SERVICES WILL BE DELIVERED

Jessie Risman, LLC offers both in-person and online telehealth services. In-person services are held at the address listed above under provider information.

COMMON SERVICE CODES AND PRICES

*90791: Initial 50-minute psychotherapy intake
*90834: Standard 50-minute psychotherapy session
*90837: Extended 75 or 90-minute psychotherapy session
*90847: Couples or family therapy session
*90853: Group therapy

The standard rates for psychotherapy counseling services at Jessie Risman, LLC are: 50 minutes: \$145/session 75 minutes: \$218/session 90 minutes: \$261/session Group therapy: \$80/session *All rates are based on a 50-minute clinical hour.

Your current rate: \$145

You can determine your annual charges by multiplying your current rate by the number of sessions you plan to attend RATE x NUMBER SESSIONS = ANNUAL COST

Example:

If you attend *weekly 50-minute psychotherapy sessions* for the next *52 weeks* with no breaks in treatment, at the standard rate of \$145/session, your total annual service fees would amount to: \$7,540

At Jessie Risman, LLC, I recognize that each client's time in therapy is unique. As a result, how long you engage in therapy and how often you attend sessions will be influenced by various factors. This includes, but is not limited to:

- Your schedule and life circumstances
- Therapist availability
- Personal finances
- Ongoing life challenges

• The nature of your presenting problems and how you address them The client and the therapist will continue to assess the appropriate frequency of therapy and will work collaboratively to determine when you have met your therapeutic goals or if your needs change.

Please note:

- Jessie Risman, LLC has a 24-hour cancellation policy. If you fail to cancel your appointment 24 hours in advance, you will be charged your full session rate.
- The *Good Faith Estimate* is designed to prevent healthcare patients from surprise bills from out-of-network providers. Weekly therapy at a set rate does not involve surprises. The rate is fixed for all your sessions unless your rate per clinical hour is altered, which will be explicitly discussed well in advance. You may terminate your therapy at any time.
- Jessie Risman, LLC can provide a superbill to submit to your insurance carrier. Please bring this to the attention of your therapist. This often requires the client providing exact requirements from their insurance provider to create the document. Additionally, there will be an in-depth discussion to further educate the client appropriately.
- Jessie Risman, LLC can provide receipts for your services for your records upon request.

DISCLAIMER

- Adjunct services the provider may recommend as part of treatment for the client are not included in a *Good Faith Estimate*.
- The *Good Faith Estimate* will not include potential rate adjustments. The clinician will provide ample notice of fee increases, and the client has the right to end therapy at any time to seek more affordable care. The *Good Faith Estimate* will not include adjustments to billing if the client were to choose to engage in a 90-minute session instead of a 50-minute session. The client has the right to request a longer session at any time.
- The information provided in the *Good Faith Estimate* is an estimate. Actual items, services or charges may differ.
- The *Good Faith Estimate* does not require the client to obtain any of the listed services offered or provided above.
- The list of Common Services above is not comprehensive. Therefore, per conversations around client needs and desires, the *Good Faith Estimate* can change based on decisions made around care.
- The client has the right to engage in a dispute resolution process if the actual costs of services significantly exceed those listed in the *Good Faith Estimate*.
- To learn more about the No Surprise Act and the *Good Faith Estimate*, or to get a form to start the dispute process, contact your mental health provider or go to: www.cms.gov/nosurprises or call: HHS at 1-800-368-1019.
- Keep a copy of this *Good Faith Estimate* in a safe place for future reference.

Today's date: XX/XX/XXXX