## Notice of Good Faith Estimates

Effective January 1, 2022

Notice: You have the right to receive a "Good Faith Estimate" explaining how much your medical care will cost.

Under the law, health care providers need to give patients who don't have insurance or who are not using insurance an estimate of the bill for medical items and services.

You have the right to receive a Good Faith Estimate for the total expected cost of any items or services upon request or when scheduling such items or services. This includes related costs like medical tests, prescription drugs, equipment, and hospital fees.

Make sure your health care provider gives you a Good Faith Estimate in writing at least 1 business day before your medical service or item. You can also ask your health care provider for a Good Faith Estimate before you schedule an item or service.

Make sure to save a copy or picture of your Good Faith Estimate.

Your Good Faith Estimate(s)

If your provider is using teletherapy.io for billing, you will receive an Estimate immediately upon booking an appointment. You can access your Estimate by logging into your Client Portal, and going to the Billing section. This will be an estimate for the cost of the session(s) scheduled.

\*\* Depending on your progress, you may need weekly sessions for some period of time. If you need weekly sessions for one year, you can estimate 50 times the cost per session provided on your estimate (accounting for 2 weeks off for vacations and holidays.)

## **Disclaimer:**

Your Good Faith Estimate shows the costs of items and services that are reasonably expected for your health care needs. The estimate is based on information known at the time the appointment was booked and does not include any unknown or unexpected costs that may arise during treatment.

Your Estimate is not a contract and does not require you to obtain the items or services from any of the providers or facilities identified. However, if you cancel an appointment you are still obligated to abide by the cancellation policy of the provider or facility.

If you receive a bill that is at least \$400 more than your Good Faith Estimate, you can dispute the bill.

You may contact the health care provider or facility listed to let them know the billed charges are higher than the Good Faith Estimate. You can ask them to update the bill to match the Good Faith Estimate, ask to negotiate the bill, or ask if there is financial assistance available.

You may also start a dispute resolution process with the U.S. Department of Health and Human Services (HHS). If you choose to use the dispute resolution process, you must start the dispute process within 120 calendar days (about 4 months) of the date on the original bill. There is a \$25 fee to use the dispute process.

For questions or more information about your right to a Good Faith Estimate or the dispute process, visit www.cms.gov/nosurprises or call (800) 368-1019.

BY SIGNING MY NAME BELOW I AM AGREEING THAT I HAVE READ, UNDERSTOOD AND AGREE TO THE ITEMS CONTAINED IN THIS DOCUMENT.

Client Signature* (required)	Today's Date* (required)