

FEE SCHEDULE

This office will provide you with appropriate assistance, including help in filling out insurance forms. You, however, and not your insurance company are responsible for payment of the fees to which we have agreed. It is very important to find out exactly what mental/behavioral health services your policy covers. In most cases, advance authorization is necessary. Make sure you have called the 800# and confirmed if you require a pre-authorization or not. Please note, you are responsible for the amount on a non-insurance basis, which is \$125 per visit.

If you contract our office on a fee for service basis (non-insurance), our fee for neurofeedback/therapy is \$125 per 60 minute session. Telephone conversations longer than 10 minutes, general report writing and editing, and extended sessions will be charged at \$35 per 10-minute increments.

If you require legal reports from our office, you must have your attorney request this in writing. Our fees are \$200 per hour billed in increments of \$50 per each 15 minutes. If we are called to testify as an expert witness in your legal case, we charge \$250 per hour with a minimum of 4 hours.

Additional fee not covered by managed care:

One Time Initial Chart Set up Fee: \$25 due at the end of our first meeting.

Agreement:

I read the above office procedures carefully. I understand them and agree to comply with them:

Client name (print)	Date	Signature
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Hershel Toomim, ScD.	Date	Signature
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Stephanie DuPont, Psy.D.	Date	Signature
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