Powers Ferry Psychological Associates, L.L.C.

1827 Powers Ferry Rd., Bldg. 22, Atlanta, Ga. 30339 770-953-4744 Fax: 770-953-4640

Kate Hoover, LPC - Fee Schedule & Assignment of Benefits

Annual Administrative Fee	\$10	yearly
Initial Consultation Sessions 90791 - at least 53 min and not more than 90 min	\$175	per hour
 Individual Therapy 90837 – ≥ 53 minutes 	\$175	per hour
• Group Therapy 90853 – 45 to 60 minutes	\$60	per hour
• Other Services - to include: report / letter writing, telephone calls longer than 5 minutes, e-mails longer than 5 m prorated based on the amount of time spent at the hourly rate.	\$175 inutes, rec	per hour cord copying, mailing, etc.
Legal Work	\$175	per hour

• Missed/Late Cancellation of an Appointment within less than <u>24</u> hours / days' notice

1. I understand that regardless of my insurance status, I am ultimately responsible for the balance on my account for any professional services rendered.

2. I hereby authorize and request the insurer(s) that I or my child am covered under to pay directly to Kate Hoover, LPC. Any benefits due under the terms of this policy for services rendered to the following address: 1827 Powers Ferry Rd. Bldg 22, Marietta, Ga. 30339.

3. I understand and agree to pay the above fee schedule if I fail to cancel my appointment within 24 hours or miss the appointment except in case of emergency.

signature of patient or guardian

date

\$100

signature of psychologist

date