

FINANCES

Fees:

- Initial Assessment: \$170-250
- Ongoing Treatment, per hour: \$170
- Psychological Testing/Evaluation, per hour: \$170
- Any forensic or court related involvement: \$350 per hour. 8 hour minimum.

Or,

- Fees required by your insurance plan including deductibles/copays. Please be aware of the specifics of your plan so as to know what your expenses will be. I submit claims and forward you your copayments when due, which may include a deductible period where you could owe more per session than the copay. It can be helpful to think about that in advance and to know what your coverage will be.

Cancellations:

If you and I agree to engage in psychotherapy or psychoanalysis, you would then essentially be leasing one or more spaces in my practice weekly. That time is then reserved for you each week and it is my expectation that you pay for the reserved time whether you are present or not.

However, I also expect that people may need some time for themselves every year, for vacations, or situations that may arise. As such, you may cancel two weeks' worth of sessions every year without payment for those sessions so long as the time is planned in advance. This is two weeks of whatever frequency you see me for. For instance, if you see me once weekly, there are two sessions that may be missed without financial obligation annually. If you see me four times weekly, you can miss eight sessions. All other missed meetings, generally for any reason, will be your obligation to pay for.

If you are using insurances and need to cancel, this means you would owe the amount of your copayment as well as the amount I would have collected from insurances.

I strive to be as flexible as I can, but if payments are not made within 60 calendar days on an outstanding bill and you have not made a payment plan with me, I may need to send your bill to a collections company, or use small claims court. In general, the only information given in these circumstances is the dates and description of services rendered as well as the associate costs owed to me.

Please let me know if you have any questions. If you sign my webform, that signature represents your consent and agreement to the terms of these policies.

Sincerely,
Dr. Klein