

Patient Name: _____

Date of Birth: _____

Account Number: _____



FHN FAMILY COUNSELING CENTER SCHEDULE OF FEES

THE FHN FAMILY COUNSELING CENTER ("CENTER") IS COMMITTED TO PROVIDING OUR PATIENTS WITH QUALITY SERVICES FOR WHICH ADEQUATE PAYMENT RESOURCES ARE NECESSARY.

All billable clinical services are charged based on each service and/or scheduled unit. Payment or co-payment is due at time of service.

Educational Groups

- Participants in Educational Groups (if required for the specific group) must pay all fees up-front prior to participating in the Group. These fees include a per session charge, a screening fee, if determined necessary, and any textbook fees (if required for the specific group). No refunds are given once the class begins.

Evaluations

- Requests for evaluations will be billed to the patient or party requesting.
- All court ordered evaluations will be paid for in advance by the patient unless other arrangements are made by the Court.
- Anyone missing three (3) initial assessment appointments will not be rescheduled. They will be served on a walk-in basis to meet with the next appropriate, available therapist.

SERVICES MAY BE PERFORMED WITHOUT THE PATIENT IN ATTENDANCE OR ON-SITE; Examples of these services:

- Consultations with Colleagues.
- Paperwork on behalf of the patient, including, but not limited to processing records, writing reports, or interpreting tests.
- Phone Consultations - with the clinician, the nurse, and/or others involved in a case, with duration of more than eight (8) minutes.
- Psychological Assessments/Testing – patient will be charged the actual time spent in the administration, scoring, interpretation, and writing of the report.

Requests for copies

- If copies are requested, there may be a charge for the copies.

THE CENTER'S FEE POLICY DICTATES THE FOLLOWING PROCEDURES THAT ALL CENTER EMPLOYEES AND PATIENTS MUST ADHERE TO:

a.) The Center is willing to work with our patients to formulate reasonable payment plans that systematically reduce a patient's balance, and assist our patients with their financial responsibility. If you require a payment plan, ask to speak to FHN's Central Business Office, 815-599-7950. Once a payment plan has been agreed to, a letter will be sent to you informing you of the payment arrangement, and acknowledging your commitment to systematically reduce your balance. We expect patients to adhere to payment plans to assure uninterrupted services.

b.) If you no-show two appointments in a row or do not make your required co-payment for two appointments, you will not be allowed to schedule any appointments until the required co-payments are paid in full, or payment arrangements are made.

c.) If your account is transferred to "collection status" and you should require services from the Center in the future, you will become a "cash only" patient and your collection balance must be paid in full, or payment arrangements made, before we can schedule you for services.

MY INITIALS INDICATE I HAVE READ ITEMS (a)-(c) ABOVE.

Initials

Date