



Good Faith Estimate

A new federal regulation implementing the No Surprises Act went into effect on January 1, 2022. Under this regulation, all clients who are uninsured or opting to self-pay are entitled to a Good Faith Estimate (or GFE) for services. This GFE will show a predicted course of treatment and an estimated cost for services based on reasonable expectations at the time of scheduling. Only information known at the time of scheduling will be used to determine the GFE. There may be unknown or unexpected costs that may arise during treatment that could alter the GFE. A new GFE will be provided should this occur. Under federal law, you do have the right to dispute the bill if you and your provider have not discussed a change or provided an updated GFE. Please note, everyone's services received at H4TG Counseling are personal and customized to their journey. Clients and therapists will be in communication as treatment continues to reassess the services needed and will make any adjustments necessary to the GFE at that time.

H4TG Counseling's Master Fee List:

- \$110 - 45-minute session
- \$125 - 60-minute session
- \$140- 60-minute initial intake session
- \$150 - 60-minute couple/family psychotherapy
- \$60 - Insurance Authorization or Appeal Response Preparation and Delivery (Each Occurrence)
- \$100 - Legal Preparations (Each Occurrence)
- \$175 - Court or other Legal Appearance

Our counseling services are provided at a self-pay rate of: \$110 per 45-minute individual session or \$150 per 60-minute couple/family session

For those filing through insurance H4TG Counseling's most commonly used CPT/billing code is 90834 - individual psychotherapy for 45 minutes in an outpatient setting.

H4TG Counseling is currently contracted with the following insurance companies: Anthem/Blue Cross Blue Shield, Cigna, Evernorth.

This Good Faith Estimate shows the costs of items and services that are reasonably expected for your health care needs for an item or service. This estimate is not a contract and does not obligate you to obtain any services from the provider(s) listed, nor does it include any services rendered to you that are not identified here.

The estimate is based on information known at the time the estimate was created. The Good Faith Estimate does not include any unknown or unexpected costs that may arise during treatment. There may be additional items or services that may be recommended as part of your care that must be scheduled or requested separately and are not reflected in this Good Faith Estimate.

You could be charged more if complications or special circumstances occur. If this happens, federal law allows you to dispute (appeal) the bill.

Note: You have the right to initiate a dispute resolution process if the actual amount charged to you substantially exceeds the estimated charges stated in your Good Faith Estimate (which means \$400 or more beyond the estimated charges). 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. If the agency reviewing your dispute agrees with you, you will have to pay the price on this Good Faith Estimate. If the agency disagrees with you and agrees with the health care provider or facility, you will have to pay the higher amount.

For questions or more information about your right to a Good Faith Estimate or the dispute resolution process, visit

<https://www.cms.gov/nosurprises/consumers> or call 1-800-985-3059. The initiation of the patient-provider dispute resolution process will not adversely affect the quality of the services furnished to you.