Holly Maddy LLC and Associates Financial Agreement as of 2024

About Insurance:

All Insurance companies have different policies. Some have a deductible plan in which the client will pay the insurance contracted rate per session until the deductible has been met. After the deductible has been met, clients pay a portion or percentage of the insurance contracted rate per session. Some insurance companies have a copay, in which clients are only responsible for paying the copay each session.

About the Financial Agreement:

The cost for out-of-pocket services are listed. Once your insurance company provides us with information regarding your Mental Health or Behavioral Health Benefits, the Financial Agreement will be updated with that copay, coinsurance or deductible information. Please note that, at Holly Maddy LLC, we do our best to get your accurate Mental Health Benefit information, but we cannot 100% guarantee that the information insurance companies provide us with is always accurate.

I understand that this benefit information is subject to change based on remittance that Holly Maddy LLC receives from insurance companies after claims have been filed. I understand that insurance companies state, "Confirmation of benefits are not a guarantee for coverage or payment for services." If you do not feel that the information provided to us regarding your benefits was correct, please contact your insurance company to confirm your Mental Health Benefits. Then, please let us know as soon as possible what your accurate benefits are so that we can update your Financial Agreement accordingly.

Instructions for Clients to Check Benefits (Optional):

If you'd like to check on your benefits yourself, please call your insurance company and request "eligibility and benefit information" for "outpatient mental health services in the office." Please note, some insurance companies use the term "behavioral health" in place of mental health. The name of our practice is "Holly Maddy LLC" and we are located at 328 Thomas More Pkwy #102, Crestview Hills, KY 41017. They may ask for our National Provider Identifier; our group NPI is 1154586394.

Missed Appointment/Late Cancellation Policy:

If an appointment is missed or canceled, I understand that a \$75.00 fee will be charged unless notification is given at least 24 hours in advance. I understand that insurance companies are not responsible for missed appointments or late cancellation fees and that I, the client, will be charged directly.

Missed Appointment/Late Cancellation Policy Exceptions:

I understand that the only exception to this policy is cancellation for inclement weather or a medical emergency. If the driving conditions are very bad and you do not feel safe driving, please call in advance of your session time to cancel. If you are having a medical emergency and cannot make it to your appointment, please call in advance of your session and let us know. I understand that if I call and confirm that the session is canceled due to inclement weather or a medical emergency, there will be no charge. I understand that if I do not call, the \$75 late cancellation/missed appointment fee will still be due. I understand that if I cancel the session due to inclement weather conditions, I will not be credited for a free session.

Making Payments:

Secure online payments can be made on our website, https://hollymaddy.com. Click "Payment" \rightarrow "Pay Here" and you will be redirected to our secure online payment portal, AffiniPay. Please contact our assistant to inquire about your account balance. You may also receive statements in the mail with

information about your account balance, or we will inform you of your balance at the time of your appointment. Payment is due upon time of service. Please note that any balance that has not been paid in 90 days is subject to be sent to a collections agency.

Client Benefits

DEDUCTIBLE \$:

(Note: If you have a deductible, you can expect to pay the Contracted Insurance Rate listed below for each session until you have met your deductible.)

CO-INSURANCE %:

(Note: Once you meet your deductible, you can expect to pay a percentage of the below Contracted Insurance Rate.)

COPAY \$:

(Note: No deductible applies; You will be responsible for this amount each session.)

MAX OUT OF POCKET \$:

(Note: This refers to the maximum dollar amount per year you will spend for medical services. Once you meet this amount your insurance will cover 100% of the medical expenses.)

EAP:

(Note: EAP's cover a set number of sessions and have an expiration. Once you have reached your maximum number of sessions OR the EAP expires, insurance will take over, or you can pay out of pocket. EAP sessions do NOT cover the Late Cancellation/Missed Appointment Fee. That fee is to be paid by the patient only.)

Psychotherapy Services

Initial Diagnostic Interview (45-60 min) \$165; or Contracted Insurance Rate/Co-Pay: Individual Psychotherapy (60 min) \$140; Contracted Insurance Rate/Co-Pay: Individual Psychotherapy (45 min) \$120 Contracted Insurance Rate/Co-Pay: Family Therapy Session (45 min) \$140 Contracted Insurance Rate/ Co-Pay:

Missed Appointment/Late Cancellation (Less than 24 hour notice) Fee: \$75

Other Fees

Staff Signature

Returned Check Fee: \$30	
Scheduled Phone Consults (15 minutes) Fee: \$30	
After Hours and/or Weekend Phone Calls Fee: \$30	
_etters/Additional Paperwork Fee: \$40 base rate (Additional charges based on content & length))

______Client or Guardian Signature Date

Date