

## Payment information for Lifesimplytherapy Psychotherapist Andrea K. Joensuu, MSW, LCSW (AZ)

Lifesimplytherapy currently accepts Aetna, Quest Behavioral and United Healthcare insurance and these services are processed through Headway. Please note the same rates apply for in-person and telehealth services.

Private Pay Session Fees (rates per every 50 minutes): Fee per individual psychotherapy session: \$170 Fee per family/couples psychotherapy session: \$200

Payment is due at the time services are or were expected to be provided. This includes late cancellation (less than 24 hours) or in the event of a no-show/missed scheduled appointment. If you are unable to attend your scheduled appointment, please notify your therapist at least 24 hours in advance. Failure to do so will result in a late cancellation/no show fee equaling the full price of your scheduled session. An email or text message is sufficient to notify your therapist of the cancellation or reschedule.

Lifesimplytherapy accepts payment in the form of Zelle, Credit Card online (through website www.lifesimplytherapy.com) or Cash.

To pay with Zelle, please indicate **akjoensuu@lifesimplytherapy.com** in the Recipient Box and **Lifesimplytherapy** in the Business Name Box. Payment is always due at the time of service.

Superbills for reimbursement from insurance companies are also provided upon request. Billing will take place in 15 minutes increments if a session exceeds the standard session length of 50 minutes. If deemed beneficial, extended sessions longer than 50 minutes may also be scheduled ahead of time.

Other Fees: Any work related to a legal situation (i.e. attorney calls, writing reports and court appearances) will be billed at \$480/hr (billed in 15 minute increments). This includes preparation as well as travel time if applicable.

Unpaid balance: Please note that if your balance is unpaid, your next appointment(s) may be canceled or postponed if you have not made arrangements for payment. In the event you are needing a personalized payment plan to ensure continuity of care, please do not hesitate to inquire directly of this option. I am happy to work with your unique needs if ever necessary. Therapy service fees are non-refundable.

If you have questions, please contact the practice owner directly at <a href="mailto:akjoensuu@lifesimplytherapy.com">akjoensuu@lifesimplytherapy.com</a>. Your signature below acknowledges agreement to Lifesimplytherapy's 24 hour cancellation notice and payment policy.

Client	signature
Client	Name:
Date:	