

CHAPEL HILL PEDIATRIC PSYCHOLOGY, P.A.

With Adolescent, Adult, and Family Services

Working to promote healthy development of children, youth, adults, parents and families

Medicare Notice

This notice is to inform you that we are NOT a Medicare Provider and that no claims for services rendered by our office can be filed due to our “opt out” status with Medicare. We will not file claims to either Medicare or secondary insurances on your behalf or provide information to you to be able to file claims.

By signing this notice, you are acknowledging and agreeing to the following:

1. You will not seek reimbursement from your primary or secondary insurances for services rendered by our office due to our “opt out” status.
2. You will be a self-pay client and responsible for full payment of services rendered by our office.
3. You are aware of our current service rates (see below) and that during your treatment, if rates change, you will be notified.

| <u>Service:</u> | <u>Rate:</u> |
|----------------------------|--------------|
| Initial Intake | \$280.00 |
| Therapy 60 minutes | \$225.00 |
| Therapy 45 minutes | \$185.00 |
| Consultations | \$225.00 |
| Neuropsychological Testing | \$1,000.00 |
| Educational Testing | \$1,000.00 |
| Materials Fees | \$100.00 |
| Missed Appointments | \$100.00 |

Client Signature

Print your name

Date