



**CLIENT RIGHTS TO A  
GOOD FAITH ESTIMATE OF SERVICES.**



Dear Blue Mound Counseling Clients,

In compliance with the No Surprises Act that went into effect January 1, 2022, all healthcare providers are required to notify clients of their Federal rights and protections against “surprise billing.”

This Act requires that we notify you of your federally protected rights to receive a notification when services are rendered by an out-of-network provider, if a client is uninsured, or if a client elects not to use their insurance.

Additionally, we are required to provide you with a Good Faith Estimate of the cost of services (see attached our standard “Table of Services and Fees”). It is difficult to determine the true length of treatment for mental health care, and each client has a right to decide how long they would like to participate in mental healthcare.

Therefore, in this notebook you will find a fee schedule for the services typically offered by our therapist(s) (licensed clinicians), and we will collaborate with you on a regular basis to determine how many sessions you may need.

It is a Federal requirement that we inform each client. This notebook is just one of several avenues that we will be implementing this brand new legislation by informing clients. If you have any additional questions, please don't hesitate to ask.

Thank you very much,  
Alex Vis, Owner  
Blue Mound Counseling, LLC  
Licensed Mental Health Counselor (MH18620)  
alexvis@bluemoundcounseling.com  
www.bluemoundcounseling.com/pricing  
407.906.7792

Service code (CPT Code)	Description	Fee for Service (Number of Sessions Will Be Determined as We Progress)
90791	Initial Diagnostic Evaluation, 50 minutes	\$175
90834	Psychotherapy, 38-52 minutes minutes	\$175
90837	Psychotherapy > 52 minutes (This fee is the hourly rate for licensed clinicians and is used for all prorated calculations as indicated.)	\$2.50 / minute
90846	Family (Couples) Psychotherapy without Patient Present, 50 minutes	\$200
90847	Family (Couples) Psychotherapy with Patient Present, 50 minutes	\$200
98966-98968	Telephone Assessment & Management	\$175/hr
98970-98972	Online Digital Evaluation & Mgnt (Responding to Email & Text Messages):	\$2.50 / minute
Cancelation Fee	Your Therapist Requires a 24-Hour Cancelation Notice	You are Responsible for the Full Fee of the Missed Appointment
Production of Records		May Not exceed \$1 per page. A fee of up to \$1 may be charged for each year of records requested.
Legal Engagement Fees	Phone, consults, letters, travel time, attendance at court, etc. A minimum of eight (8) hours will be required per day to appear at court.	Prepaid \$250.00 / hour
Returned Checks		\$25 / Check
All Card Charges	Debit cards, Credit cards, HSA cards used as payment for fees	3.5% For \$175, that would be an additional \$5.25, totaling \$181.13

Sexual Dependency Inventory (SDI) developed by the International Institute \$325 includes assessment and for Trauma and Addiction Professionals (IITAP) follow up review of results

**Total Estimate:** This Good Faith Estimate explains your therapist's rate for each service provided. Your therapist will collaborate with you throughout your treatment to determine how many sessions and/or services you may need to receive the greatest benefit based on your diagnosis(es)/presenting clinical concerns. Please note that Place of Service (in office vs. telemental health) is not delineated above since the charges are identical.



If you believe you've been wrongly billed, you may contact:

(1) Alex Vis, owner of Blue Mound Counseling, LLC by calling 407-906-7792 or emailing [alexvis@bluemoundcounseling.com](mailto:alexvis@bluemoundcounseling.com).

(2) The Florida Board of Health: The Health Care Complaint Portal allows consumers to file a complaint with the appropriate state agency. You will be asked a series of questions to help identify the nature of your complaint. After you have answered all of the questions, you will see a summary page with instructions on how to file your complaint.

Visit <https://mqa-flhealthcomplaint.doh.state.fl.us>

Visit <https://www.cms.gov/files/document/model-disclosure-notice-patient-protections-against-surprise-billing-providers-facilities-health.pdf> for more information about your rights under Federal law