



Dr. Shannon Lilja DBH LPC LMHC CDP CADC-II-I

FEE AND PAYMENT POLICIES

Fee for a 50-minute treatment session is \$100.00

Fee for a one hour + 20 minute treatment session is \$145.00

Payment is due prior to the rendering of services. Sessions will end promptly at the scheduled end-time; extending session time to accommodate client will occur only at the therapist's discretion.

Telephone calls with you or to other persons on your behalf, which are greater than 15 minutes in length, will be charged at \$100.00 per hour, billed on the quarter hour. Insurance does not pay for telephonic services.

Any requested participation in legal matters will be charged at a rate of \$150.00 per hour from portal to portal.

Before Sandalwood Counseling LLC will submit any insurance claims on your behalf, it is your responsibility to inquire about your coverage, deductible obligations, co-payments, number of sessions covered, etc, and to communicate this information to Sandalwood Counseling. A copy of both sides of your insurance card is required, as is a release of information between Sandalwood Counseling and your insurance company in order for an insurance claim to be processed. **Note: if any claim amount is denied or not covered (due to deductibles, non-coverage, etc), you are responsible for full payment, which is due at notification from Sandalwood.**

Sandalwood Counseling will submit claims on your behalf for EAP services. Your authorization number of certification number is required to do so, as is a release-of-information to process the claim.

Filing out-of-network insurance claims are your responsibility. An invoice for claim submission will be provided to you at your request. This invoice will include demographics, dates of service, diagnostic code(s), and charge/payment amounts. You are responsible for full payment of services to Sandalwood Counseling LLC, regardless of insurance coverage. Outstanding balances may be turned over to a collection agency for remittance.

Sandalwood Counseling utilizes Square Card Reader technology for electronic payments (primarily credit cards). **By signing below, you authorize Sandalwood to swipe the credit/debit card provided by you, for session payment via Square Card Reader and agree to charge your account an additional \$2.00 processing fee.** With your signature, you grant permission for Sandalwood to exchange pertinent information with Square in order to process payment. Further, if your card is not read properly, or if payment is not transacted in completion, you are responsible for full payment of services to Sandalwood Counseling LLC by, or at the time of, the next scheduled therapy session.

In the case you write a check or provide an alternative payment method: by signing below, you acknowledge checks or other means of payment will require use of banking services and that you grant permission for Sandalwood to utilize or exchange necessary information in order to process payment.

CANCELLATION POLICY

Counseling is by appointment only. In the event you are unable to keep you appointment, it is your responsibility to notify me 24-hours before your session time to avoid the \$60.00 no show or late-cancellation fee (insurance does not cover this charge). Frequent cancellations could result in the loss of services.

Thank you!

I have read, and understand and agree to, these payment and cancellation policies...

Client Name: _____ SSN _____

Client Signature: _____ Date: _____