

## Kim Kares Counseling Self-Pay Agreement

Most patients/clients who have high deductibles or high co-pays prefer to pay for their care personally instead of filing insurance.

Many other patients/clients also prefer to pay for their care personally so their information remains confidential (not released to insurance companies) and to avoid being labeled as having a mental illness.

For our office to be able to file insurance, I must give you a mental illness diagnosis. This diagnosis will be on your health records for the rest of your life. It can affect employment opportunities and the ability to qualify for life and disability insurance.

We suggest that, if your reimbursement from insurance is low or if your deductible and co-pay are high that you avoid filing insurance if you are concerned about these issues.

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I, \_\_\_\_\_, am signing this agreement to indicate that I am seeking treatment with provider Kimberlee Tucker, LPC.

Treatment will begin on \_\_\_\_\_.

The cost of treatment will be \$145 for the initial session and \$125 for each additional session.

**I am choosing not to use my insurance benefits for this service.**

I agree that the provider will collect the full fee-for-service rate. Plan provider discounts and the plan maximum that applies to medically necessary covered services will not apply and will not limit the amount I may become obligated to pay for the proposed services.

I further agree that I will pay for all treatment at the time service is rendered.

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Client Name

Date