

**Under the No Surprises Act effective January 1, 2022, you have the right to receive a Good Faith Estimate explaining the cost of services at my practice. You will receive a Good Faith Estimate from me prior to beginning counseling services with me.**

Under the law, health care providers need to give patients who do not have insurance or who are not using insurance an estimate of the bill for medical items and services.

- Make sure your health care provider gives you a Good Faith Estimate in writing at least 1 business day before your medical service or item. You can also ask your health care provider, and any other provider you choose, for a Good Faith Estimate before you schedule an item or service.
- If you receive a bill that is at least \$400 more than your Good Faith Estimate, you can dispute the bill. Dispute information is available upon request; however, please know that Ohio licensing board rules require me to provide you with the actual cost of my services in a written informed consent form which you must agree prior to my providing counseling services.
- Please note that my service fees will remain in effect for 12 months. Any changes to my service fees will require a change in the informed consent form, which you must agree to prior to the change effective date.
- It is difficult to determine the true length of treatment for mental health care, therefore I 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. You are free to discontinue counseling services at any time or counseling services may otherwise be terminated in accordance with the language written in the Informed Consent for Counseling Services form.
- Make sure to save a copy of your Good Faith Estimate. For questions or more information about your right to a Good Faith Estimate, visit [www.cms.gov/nosurprises](http://www.cms.gov/nosurprises) or call me at 440-941-1842.