



PAYMENT POLICIES

****Payment due at time of service****

Session Fees:

Initial Consultation Phone/Meeting: Up to 30 minutes free of charge (\$15 each additional 15 minutes)

\$125 per 55-minute individual session

\$50 Parent Meeting – One hour

Cancellation/No Show Policy: Although unanticipated conflicts sometimes arise, it is the expectation that you will contact Anne Drake, LCSW to cancel scheduled appointments. 24-hour notice is required for cancellations. If you do not cancel and then do not come to an appointment, a \$45 Cancellation Fee will be charged to your debit/credit card on file. Cancellation due to emergency, sudden illness, or severe weather may be considered exceptions. More than 3 missed appointments in one month may result in losing your reserved time.

Phone Call and E-mail Communication:

Phone calls and/or e-mails to or from you, or on your behalf, that are less than 15 minutes will be considered a free consultation within reason. Phone calls and/or emails that are 15 minutes or longer are subject to a \$45 consultation charge. These fees will be charged directly to your debit/credit card on file.

School Meetings/Consultations:

Anne Drake, LCSW, holds a Professional Educator License in School Social Work as well as Education of the Deaf/Hard of Hearing. She is available to attend school meetings and provide consultation. These fees are **not covered by insurance**.

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| • School meetings | \$50/hour |
| • Verification of services – letter for schools | \$25 |
| • Progress Reports/Evaluations | \$25 |

Insurance:

Anne Drake, LCSW, is an approved provider for Blue Cross Blue Shield PPO of Illinois. For out-of-network insurance plans, you will be provided with a receipt, known as a superbill, that you can turn into your insurance company for reimbursement, according to your plan specifications.

Payment Methods:

Payment by cash or check is due at the time of service and the receipt will be provided by email following the service. Please note, a \$25.00 fee will be added to your account for each check that is returned.

Payment made by credit card will be charged following the service with an emailed receipt as confirmation. Payment made by credit will be assessed a 2% service fee to cover the cost of transactions.

Anne Drake, LCSW, contracts with ANE Credentialing and Billing to process all payments. ANE Credentialing and Billing has an authorized Business Associates Agreement with Anne Drake, LCSW, to comply with HIPAA requirements to protect your health and financial information.

Debit/Credit Card:

It is required that a debit/credit card is kept on file. All debit and/or credit card information is kept securely. Regular session fees **will not** be charged to this card without your permission.

Name on card: _____ Exp. Date: _____ Security Code: _____

Card Number: _____ Billing Zip Code: _____

_____ Yes, I would like to pay my regular session fees with the above debit/credit card.

_____ No, I will pay my regular session fees by check or cash.

My signature below indicates that I understand and agree to the above financial policies.

Signature: _____ Date: _____

