

Eric Cuestas-Thompson, LICSW

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OFFICE POLICIES AND FINANCIAL AGREEMENT **Payment is due to Eric Cuestas-Thompson, LCSW, LISAC**

1. Appointment must be rescheduled at least 24 hours in advance.
2. Missed appointments, without 24 hour notice, clients arriving late or needing to leave a scheduled session early, will be billed at full price, directly to the client.
3. Payment is due on date services are rendered. If for whatever reason this is not possible via check or cash at the time of visit, clients must complete the Electronic Payment Authorization form. Guarantee information will be kept on file and will be used in the instance where payment is not made, in the case of minors not accompanied by financially responsible adults, clients with payers not accompanying client to office visit, and sessions outside of regular office hours.
4. For minor clients, the guarantor of the account must make arrangements with the Office to provide a credit card or deposit guarantee before appointments can be scheduled. Guarantors should complete and submit the Electronic Payment Authorization form.
5. Any amount due, left a month outstanding, may result in a transfer of services to fulfill your therapeutic needs. Previous arrangements can be made with the Office.
6. This office will make every effort possible to work with insurance companies but the fees incurred are the ultimate responsibility of the client or the client's family.
7. A Therapeutic Session is 45 - 50 minutes. Additionally, you and the therapist may decide that a two-session length of time may be beneficial as well. EMDR sessions often requires a two session length of time, lasting up to 100 minutes.
8. Travel time to and from scheduled milieu therapeutic sessions will be billed at \$150 per hour.
9. The rate for consultation work with other professionals is \$150 per hour.
10. The rate for an intervention in the Seattle-Tacoma area is \$3,000.00.
11. The rate for an intervention outside the Seattle-Tacoma area that involves travel is \$6,000.00 plus expenses.
12. If after preparation for the intervention with the family, the intervention is cancelled, the fee will be based on the rate of \$150.00/hour.
13. The cost of the intervention includes letter and document review, telephone time with involved parties, the intervention dress rehearsal, the intervention itself, and follow-up with appropriate agencies. Preparation meetings with family members and intervention participants and travel time are not included in the cost of the intervention and will be billed at \$150.00 per hour.
14. Teleconference is available and should be used in the event of emergencies. While there is no charge for brief phone interactions. Interactions over 15 minutes will be charged at 30 minute intervals at \$200/hour.
15. Any account which is not paid in full each month will be assessed a \$25.00 rebilling/collection fee, for servicing an account receivable, which will be added to their balance.
16. If for any reason your account is referred to collections, your signature below approves the release of information on this account. If the account is referred for collection, client hereby agrees to pay a collection fee of up to 50% of the amount owing plus reasonable attorney's fees & court costs.

By signing this document, I am stating that I have read and agree to the terms stated above.

Client Name (printed): _____

Client Name (signed) _____ Date: _____

Parent or Guardian signature (if under 18) _____ Date: _____