

GOOD FAITH NOTICE

THE LAW

Due to the "No Surprises Act," it requires health care providers (including mental health providers), to inform their uninsured and private pay clients that they have a right to a "Good Faith Estimate" to help clients estimate their expected charges they may be billed for.

NOTICE TO CLIENTS

NO RATE PROGRAMS

ICA is reimbursed by government, foundation or private donations OR counseling costs were already covered in programs and your counseling sessions are a non-expense to you.

MODIFIED RATES

Some clients are experiencing extraordinary circumstances and there are legitimate reasons for reductions of fees. This is accomplished by request and an approved application process.

NORMAL RATES

Our normal rates are listed in the Informed Consent, and the Good Faith Estimate specifically.

You have the right to receive a "Good Faith Estimate" explaining how much your medical and mental health care will cost.

Under the law, health care providers need to give patients who don't have insurance or who are not using insurance an estimate of the expected charges for medical services, including psychotherapy services.

You have the right to receive a Good Faith Estimate for the total expected cost of any non-emergency healthcare services, including psychotherapy services.

You can ask your health care provider, and any other provider you choose, for a Good Faith Estimate before you schedule a service.

If you receive a bill that is at least \$400.00 more than your Good Faith Estimate, you can dispute the bill. Make sure to save a copy or picture of your Good Faith Estimate.

For questions or more information about your right to a Good Faith Estimate, visit www.cms.gov/nosurprises.