Vera Counseling Collective, PLLC
Financial Policy and Additional Services Fee Schedule

Effective: July 22, 2026

This policy supplements and is incorporated into the practice's Informed Consent for Outpatient Counseling Services. It explains the fees you may be required to pay, including fees for services that are not part of a standard counseling session. Please ask questions about any fee or policy you do not understand before signing.

1. Standard Clinical Services

The following fees apply unless a different amount is required by a valid insurance contract or another written agreement:

Service	Description	Fee
Initial diagnostic assessment - *individual*	75 minutes assessment and intake	$175
Initial diagnostic assessment - *couples*	75 minutes assessment and intake	$200
Individual/couple counseling session	30-44 minute counseling session	$100
Individual/couple counseling session	45-60 minute counseling session	$150
Individual/couple counseling session	75 minute counseling session	$200
Extended counseling session	When clinically appropriate and agreed upon in advance (if time is available)	$45 per additional 15 minutes

2. Payment and Insurance Responsibility

- Payment is due at the time of service. The practice may require a valid payment method to be maintained on file under a separate payment authorization.
- You are responsible for deductibles, copayments, coinsurance, noncovered services, denied claims, and balances not paid by insurance or another responsible party, except when a payer contract or law provides otherwise.
- Insurance benefits are not a guarantee of payment. Missed appointments, late cancellations, letters, forms, record preparation, extended communications, and legal involvement are generally not covered by insurance.
- When you have separately authorized card-on-file payments, the practice may charge amounts due under this policy and will provide a receipt or account statement.
- Uninsured or self-pay clients will be provided a Good Faith Estimate of expected charges when required by federal law.

3. Attendance, Late Arrivals, and Cancellations

Policy item	Terms	Fee
Late cancellation	Appointments must be canceled or rescheduled at least **24 hours** before the scheduled start time.	$100
Missed appointment / no-show	Applies when you do not attend and do not cancel within the required notice period.	$150
Late arrival	Late arrivals may join for the remaining scheduled time. Sessions will still end as scheduled, and a shortened session may reduce therapeutic benefit.	Full scheduled-session fee

Exceptions may be considered for emergencies or other circumstances approved by the practice. Repeated missed or late-canceled appointments may lead to changes in scheduling or administrative closure. Insurance does not ordinarily reimburse these fees.

4. Additional Professional Services

Brief scheduling and routine administrative messages are not charged. Clinical communication or other professional work completed outside a scheduled counseling session may be billed when it requires more than 10 minutes. Once chargeable work exceeds 10 minutes, the total time spent will be billed in 15-minute increments. When reasonably possible, the practice will explain the anticipated fee and obtain your approval before completing optional non-session work.

Service	Examples / scope	Fee
Care coordination	Treatment-related communication with authorized physicians, psychiatrists, therapists, attorneys, family members, or other involved professionals. Legal or forensic consultation, subpoena response, and testimony are billed under Section 6.	$45 per 15-minute increments
Extended phone, email, or portal communication	Clinical communication beyond brief scheduling or administrative matters.	$45 per 15-minute increments
Letters and forms	Treatment verification, accommodation requests, leave forms, or other documents within the clinician's role.	$45 for the first 15 minutes, then $45 for each additional 15-minute increment
Treatment summary	Written summary of treatment history, goals, progress, and recommendations when clinically appropriate.	$45 per 15-minute increments
Clinical record review	Review of outside or extensive prior records outside routine treatment.	$45 per 15-minute increments
Expedited request	Optional rush completion of an accepted request within 3 business days.	$75 additional fee

Clients remain responsible for valid unpaid balances resulting from declined, returned, or reversed payments. The practice does not charge a separate returned-payment or chargeback fee.

5. **Clinical Records and Copies**

- Requests for records should be submitted in writing. A valid authorization may be required before records are sent to another person or organization.
- Electronic copies of clinical records are generally provided at no charge. If paper copies, electronic media, or mailing are requested, any fee will be limited to reasonable, cost-based copying, supply, and postage expenses permitted by applicable federal and Arizona law.
- If a request is expected to involve substantial time or cost, the practice will provide an estimate when reasonably possible before completing it.
- Psychotherapy notes, information about another person, and information subject to a lawful access limitation may be handled differently from the general clinical record.

6. **Legal, Court, and Forensic-Related Services**

Treatment does not automatically include participation in legal proceedings. The clinician may decline voluntary requests that fall outside the treatment role, available information, professional competence, ethical duties, or scope of practice. The clinician does not serve as a forensic evaluator or expert witness unless a separate written agreement is signed. A subpoena, court order, or other compulsory legal request will be handled according to applicable law and does not automatically create an agreement for the clinician to provide expert opinions or services at the private rates listed below.

Legal service	**What may be billed**	**Fee**
Attorney or third-party consultation	Legal-case consultation, telephone calls, meetings, preparation, and follow-up requested by a client, attorney, or third party and accepted by the clinician.	$ 225 per hour, billed in 15-minute increments
Subpoena or legal-record response	Review of the legal request, consultation, preparation, and lawful production of records. Records will be released only when authorized or required by applicable law.	**Document-production and clerical costs:** amounts permitted by applicable law. **Other professional services:** $225 per hour only when separately agreed to in writing or authorized by a court or tribunal.
Deposition or testimony	Preparation, attendance, testimony, waiting time, and follow-up for voluntarily arranged services accepted under a separate written agreement. Compelled attendance will be handled according to applicable law or court order.	Voluntarily arranged services: $250 per hour, with a 2-hour minimum. Fees for compelled attendance are limited to amounts permitted by law or ordered by the court.
Court or hearing attendance	Voluntarily arranged attendance and waiting time under a separate written agreement. Travel is billed separately. Compelled attendance will be handled according to applicable law or court order.	Less than a half-day: $250 per hour; half-day flat fee: $1,000; full-day flat fee: $2,000. Travel is billed separately. Half-day means up to 4 reserved hours. Full-day means more than 4 and up to 8 reserved hours.
Travel	Travel time and reasonable expenses for voluntarily arranged in-person legal services. Compelled travel will be handled according to applicable law or court order.	$150 per hour, plus reasonable expenses

Legal services continued.		
Advance retainer	Deposit required before substantial voluntarily requested legal work begins or deposition or court time is reserved. A retainer is not a condition of complying with a valid subpoena or court order.	Estimated total, with a $1,000 minimum, due 7 business days in advance

Legal-service fees are not ordinarily covered by insurance. The private rates in this section apply to voluntarily requested services that the practice accepts under a separate written agreement. Fees for compelled record production, attendance, or testimony will be limited to amounts permitted by applicable law or ordered by a court or tribunal. Any unused portion of an advance retainer will be refunded after earned fees and lawful costs are deducted. If voluntarily reserved legal time is canceled with fewer than 3 business days' notice, the practice may retain or charge an amount up to the applicable fee for the time reserved, based on the time that could not reasonably be rebooked and to the extent permitted by the written agreement and applicable law.

7. Refund Policy

- Fees are not refunded for counseling or other professional services that have already been provided.
- Verified overpayments and credit balances will be submitted for refund to the appropriate payer or original payment method within **10 business days after verification**, unless a payer contract or applicable law requires a different process. Additional processing time may be required by the bank or payment processor.
- Unused portions of retainers or prepayments will be refunded after earned fees, authorized charges, and lawful costs are deducted.
- Refund questions or disputes should be submitted to **Vera Counseling Collective at hello@veracounselingcollective.com.**

8. Past-Due Balances and Collection Procedures

- An account is considered past due when a balance remains unpaid for more than **30 days after the due date**.
- The practice may send statements, contact you regarding the balance, request an updated payment method, or offer a written payment arrangement.
- Nonemergency scheduling may be paused or services may be administratively closed when a balance remains unresolved, consistent with professional obligations and continuity-of-care considerations.
- After reasonable notice, the practice may refer an unpaid balance to a collection agency or pursue another lawful collection method. Only information reasonably necessary for collection will be disclosed.
- You remain responsible for the unpaid balance. **The practice does not charge a separate collection fee**, although lawful costs may be awarded through a court proceeding.

9. Fee Changes and Estimates

- The practice may change fees or policies by providing at least 30 days' written notice before the change takes effect.
- When a material change could affect your decision to continue treatment, the practice will ask you to review and sign an updated acknowledgment when required.
- Insurance-contracted rates, deductibles, copayments, and coinsurance may change based on payer decisions or benefit-year changes and may not be controlled by the practice.
- When the total cost of an optional service cannot be known in advance, the practice will provide a reasonable estimate when possible. The final amount may differ if the scope of work changes.

10. Client Acknowledgment

By signing below, I acknowledge that I received and reviewed this Financial Policy and Additional Services Fee Schedule. I understand the fees I may be required to pay, the refund policy, the collection procedures, and that insurance may not cover non-session or additional professional services. I had an opportunity to ask questions and agree to these terms.

_____ _____

Client name **Date of birth**

_____ _____

Client, parent, legal guardian, or financially responsible party signature **Date**

_____

Relationship to client

Please retain a copy of this document for your records.