

## Sarah Horvath, LCSW

800 Hwy 290 West  
Building A, Suite 300  
Dripping Springs, Texas 78620  
(512) 625-4101

### **Office policies and Service Agreement**

**Please sign below to acknowledge you have read and understand this agreement.**

#### **You're Time**

**Psychological Therapy is a mental health treatment and is typically covered by medical insurance. An excuse from work or school can be provided at your request. Therapy sessions are designed specifically for you, the more prepared you are for your session, the more value you will receive.**

#### **Therapy Rates**

Basic rate for therapy is 125.00 Evaluations are 190.00

Specialized treatment, crises intervention, complications and additional time are billed separately.

Reports – Variable rates. Consultations - 125.00 per hour. Returned checks – 50.00

**Court appearance** If there is subpoena or request to appear or testify for a court hearing, trial or related duty, I have to clear my schedule in advance of the court date. Specific policies are implemented to minimize the impact on clients and the function of my office.

Court fees – 300.00 per hour - door to door time.

Retainer fee - 1500.00 required 5 days prior to court date or 600.00 and a credit card on file.

Minimum charge 600.00 Charges will begin on the court date and end when released by the court or attorney and door to door time has been completed, regardless if testimony or appearance was made or not. Each hour is billed as a complete hour at the minute that hour begins, there are no increments of hours billed. Court appearance of any kind cancelled without a minimum of a full 48 hour Monday – Friday 8:00 – 5:00 notice will be billed 600.00. Cancellations after 5:00 PM on Friday will be considered a cancellation given on the following Monday 8:00 AM. Check, money order or a valid credit card on file is accepted for retainer and/or payment of fees.

#### **Insurance – There are many on-going changes in this area, please read:**

It is your responsibility to know and monitor your insurance benefits and limitations. All deductibles, co-pays, co-insurance and portions not covered by your insurance are your responsibility. My office is not liable for incorrect information regarding your insurance benefits or limitations. My office files insurance claims electronically and will make limited efforts to obtain benefit information and authorizations if needed, however, it does not guarantee payment by your insurance company. **I strongly recommend** that you check your insurance benefits and limitations. All charges not covered will be balance billed and due upon receipt. Thank-you for prompt payments as it allows me to run a more efficient business.

I accept in and out of network insurance.

#### **Missed/cancelled appointments fees**

Please give a minimum 24-hour prior notice to Sarah Horvath, LCSW @ 512-784-2524. You will be charged for missed or cancelled appointments without 24 hour notice unless due to an emergency or reasonable cause.

#### **Psychiatric Emergencies**

For life threatening emergencies, or eminent danger call 911.

For medication related emergencies, call your doctor.

24 hour help line – 512-472-4357 Shoal Creek Psychiatric Hospital – 512-324-2000

Sarah Horvath, LCSW 512-784-2524

**Please sign that you understand and agree to these office policies:**

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**Name and Date**