

COGNITIVE THERAPY ORANGE COUNTY

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Good Faith Estimate

Under Section 2799B-6 of the (Federal) Public Health Service Act, health care providers and health care facilities are required to provide a good faith estimate of expected charges for items and services to individuals who are not enrolled in a plan or coverage or a Federal health care program, or not seeking to file a claim with their plan or coverage both orally and in writing, upon request or at the time of scheduling health care items and services.

The below listed rates are for informational purposes only and do not represent a contractual or binding agreement between CTOC clinicians and the below signed patient.

Initial Intake appointment: \$ _____

Follow up appointment: \$ _____

Typical length of CBT treatment: 10 to 20 appointments

Patient Printed Name: _____

Patient Signature: _____

Date: _____