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Reliant health Fee Schedule

The following is the fee schedule for services offered by Reliant health Psychiatry. These prices are subject to change. Clients will be given a 30-day notice of any adjustments.

Item	Price
New Patient Evaluation**	$300.00
Follow-Up Evaluation**	$150.00

FEES NOT COVERED BY INSURANCE

Medical Records Fee	$25.00
Emotional Support Animal Letter	$50.00
Forms Fee (per page)	$10.00
Letter Fee	$10.00
Disability Paperwork - Short Form	$50.00
Disability Paperwork - Medium Length Form	$100.00
Disability Paperwork - Complex / Long Form	$150.00
Court Hearing/Appearance (4hrs minimum)	$500.00
Court Hearing/Appearance (additional 4 hours)	$500.00
5-10 minute Patient Initiated Phone Calls	$15.00
11-20 minute Patient Initiated Phone Calls	$25.00
21-30 minute Patient Initiated Phone Calls	$50.00
Overdue Balance Fee (Greater than 30 Days)	$50.00
Non-Sufficient Funds Fee	$35.00
Credit Card Chargeback Fee	$50.00
Late Cancelation / No Show Fee	$50.00

**Prices are subject to change based on insurance copay, coinsurance, and/or deductibles.

Client Printed Name: _____

Clients Representative Printed Name: _____

If the client is a minor / has a guardian:

Parent / Guardian Printed Name: _____

The CLIENT MUST sign the consent if they are able to do so. The only exceptions are if the client is a minor, or has a legal document giving permission for someone else to sign on their behalf.

_____ _____

Client / Clients LEGAL Representative / Parent or Guardian Signature Date