

1500 Sunday Drive
Suite 102
Raleigh, NC 27607



P: (919) 322-2413
F: (919) 322-2416
wakepsychiatry.com

The following information is being provided to you due to the new federal law called the “No Surprises Act” which went into effect January 1, 2022.

You are entitled to receive this “Good Faith Estimate” of what the charges could be for medication and/or psychotherapy services provided to you. While it is not possible for a psychiatrist to know, in advance, how many sessions may be necessary or appropriate for a given person, this form provides an estimate of the cost of services provided. Your total cost of services will depend on the total number of sessions you attend, your individual circumstances, and the type and amount of services that are offered to you. This estimate is not a contract and does not oblige you to obtain any services from the provider(s) at Wake Psychiatry, PLLC, nor does it include any services tendered to you that are not identified here.

This Good Faith Estimate is not intended to serve as a recommendation of treatment or a prediction that you may need to attend a specified number of visits. The number of visits that are appropriate in your case, and the estimated cost of those services, depends on your needs and what you agree to in consultation with your provider. You are entitled to disagree with any recommendations made to you concerning your treatment and you may discontinue treatment at any time.

The following chart contains a list of appropriate types of services and the associated charges:

- 40-60 Minute New Patient or Returning Patient Not Seen for 12+ Months: \$300
- 40-50 Minute Therapy/Follow-up Appointment: \$200
- 20-30 Minute Therapy/Follow-up Appointment: \$150

You and your provider will establish the frequency of appointments. Most patients are seen every 2-4 weeks initially, with visits spreading out to every 3-6 months once stable.

You have a right to initiate a disputes resolution process if the actual amount charged to you substantially exceeds the estimated charges stated in your Good Faith Estimate (this equates to \$400 or more beyond the estimated charges for a single visit).

You are encouraged to speak with your provider at any time about any questions you may have regarding your treatment plan, or the information provided to you in this Good Faith Estimate.