OM Psychotherapy Group, LLC

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General Information

Welcome to our practice. The following information is intended to answer any of your questions and to avoid confusion or misunderstanding at the beginning of our counseling relationship. If you do not understand something, please do not hesitate to ask me.

Payments

We accept payment in the form of cash, personal checks, and all major credit cards. Please make all checks payable to OM Psychotherapy Group, LLC. Payment is due at the time of your visit.

We are currently **in-network providers** with Cigna and Aetna and we will submit your claims directly to your insurance company. We are considered **out-of-network** providers with all other insurance companies and you would need to call your insurance company to verify benefits/eligibility and make certain you have out of network benefits. If your insurance company offers out-of-network benefits, you may receive full or partial reimbursement for the cost of our services. Most insurance companies that provide out-of-network benefits cover between 50%-80% of the cost per session. We will provide statements for clients to submit to the insurance company so that they can be reimbursed directly. We will also provide information to the insurance company, should they request it, to facilitate reimbursement, with the client's written permission.

Cancellation Policy

Psychotherapy is most effective with regularly kept therapy sessions. Should you be unable to attend your session it is important that you call our office as soon as possible to report your cancellation at 848. 200. 5533. Rescheduling your appointment may be possible depending on therapist availability.

You will be charged for **1/2 of your session fee** for missed appointments or cancellations with **less than a 48** - **hour notice** (unless due to illness or emergency). Please note that you will be responsible to pay an out of pocket fee for cancellations and missed therapy session with less than a 48 hour notice, as insurance does not cover these charges.

Contacting Me and Managing Emergencies

Due to my work schedule, I am often not immediately available by telephone. If I am unavailable, my telephone is answered by a confidential voicemail that I monitor frequently. I will make every effort to return your call on the same day you make it, with the exception of weekends and holidays. If you are experiencing a life threatening crisis and require immediate assistance, dial 911, or go directly to your nearest emergency room OR contact Acute Psychiatric Services (APS), a 24-hour psychiatric emergency service, at 732.235.5700.

I agree to and accept full responsibility for payment of services rendered in good faith. My signature attests that I have read, understood, and agree to the above.

Client Signature

Date

(Client's Parent/Guardian if under 18)

Print Client Name