



INSURANCE SIGNATURE ON FILE

In order for Jennifer Young, MA, LPC to file a claim with your insurance company, it is necessary for you to agree to have your signature on file. You also agree to have you or your child's mental health diagnosis disclosed to your insurance company, which may become part of your permanent health record. In some cases, your insurance carrier may request to have a treatment plan submitted. You also understand that you are responsible for the portion of your bill that is not covered by your insurance carrier whether it be a portion of your annual deductible, a copay as determined by your insurance plan, and/or the remainder of the bill.

In cases of late cancellations or "no show" appointments, you agree to pay the designated late fee of \$40. Advanced notice of at least 24 hours is required when cancelling or rescheduling appointments. Insurance companies will not reimburse for missed appointments.

I understand and agree to these terms:

Signed: _____

Date: _____

Witness: _____

Date: _____