



The Auburn-Davis Center for Dialectical Behavior Therapy

Client Financial Responsibility Agreement

Thank you for choosing the Auburn Davis Center for DBT as your mental health care provider. We are honored by your choice and are committed to providing you with the highest quality healthcare. We ask that you read and sign this form to acknowledge your understanding of our client financial policies. The client (or client's guardian if a minor) is ultimately responsible for the payment for his/her treatment and care. We are pleased to assist you by billing for providers that we have a relationship with, however, we are not an in-network provider for most insurance companies. Client's are required to provide us with the most correct and updated information about their insurance and will be responsible for any charges incurred if information is not correct or updated.

- Clients are responsible for the payment of co-pays, co-insurance, deductibles and all other treatment services not covered or denied by their insurance plan. **Payments are due at the time of service or at Parent Skills Group for teens** (unless other arrangements have been agreed upon). For your convenience we accept cash, checks or major credit cards.
- All program participants are asked to give us a credit card number on file. The card will be used for past due balances more than **30 days old** and for missed appointments.
- Clients may incur and be responsible for the payment of additional charges. These include:
 1. Charges for returned checks
 2. Charges for missed individual therapy appointments without **48 hour notice**.
 3. Costs associated with collection of client balances.
- **All group fees are payable regardless of attendance** (the only exception is client hospitalization.)

The Teen program costs are: \$6,575.00

The Adult program costs are: \$5,325.00

I have read understand and agree to the provisions of this Client Financial Responsibility Agreement.

Client, Parent or Guardian

Date

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