



ASHBURN PSYCHOLOGICAL & PSYCHIATRIC SERVICES

CHILDREN • ADOLESCENTS • ADULTS • FAMILIES

2023 Fee Schedule for Services Provided

Psychotherapy and Medication Management

A.	30 minute medication management with a psychiatrist:	\$210 - \$275
B.	45-60 minute psychotherapy with a therapist:	\$175 - \$250
C.	Diagnostic Interview with a therapist:	\$185 - \$260
D.	Diagnostic Interview with a psychiatrist:	\$440 - \$900
E.	45 min appointment with an ABA therapist:	\$180 - \$190
F.	60 min appointment with a Success and Wellness Coach:	\$170

Psychological Evaluations

A.	IQ Testing/Admissions Testing:	\$450 - \$500
B.	AD(H)D Screener/Evaluation	\$1,250 - \$1,400
C.	Personality/Emotional Testing:	\$1,400
D.	Autism Testing	\$1,555 - \$4,250
E.	Developmental Testing:	\$2,850
F.	Personality with IQ Testing:	\$1,800
G.	Psychoeducational Testing (Cognitive and Achievement):	\$3,650
H.	Psychoeducational with Personality Testing:	\$3,500
I.	Neuropsychological Testing:	\$2,500 - \$4,250

Forensic Services

A.	Case mgmt: e.g., conferences, record review, interviews, hourly	\$300 - \$650
B.	Psychological Deposition and trial testimony, per hour (minimum 2 hrs):	\$350 - \$400
C.	Psychiatric Deposition and trial testimony, per hour (minimum 2 hrs):	\$550 - \$650
D.	Per diem fee:	TBD

I agree to pay APPS for all forensic fees prior to any work being completed. Also, I am responsible for all court fees to be paid in full 72 hours prior to court even if an APPS clinician is subpoenaed by another party to testify.

Case Management

- A. Meetings, telephone contact, letter writing, etc.
 - I agree to pay for all case management work prorated at the clinician's hourly rate, as well as associated mailing and postal fees.
- B. Storage/Archive Retrieval, Copying, Mailing/Faxing of Patient Charts
 - I agree to pay for all requested copies of my records in accordance with Virginia Code Section 8.01-413 and 32.1-127.1:03. I also agree to pay for mailing and postal fees for requested copies.

General

- A. APPS accepts cash, check, or credit card (Visa, MasterCard, American Express, Discover).
- B. A \$30 fee is assessed for any returned checks.
- C. APPS requires a 2 business days' notification of appointment cancellation. If this notification is not received, your account will be charged a fee for the scheduled appointment. The full fee will be charged for the following services without 2 business days' cancellation: consultation, therapy, medication management, Cogmed, and forensic meetings. A \$500 fee will be charged for evaluations/testings without 2 business days' cancellation (i.e. developmental, psychological, speech and language, neuropsychological, forensic, parenting capacity and psychoeducational). Late cancellations for forensic services are billed per the

guidelines of the Forensic Services Agreement. Fees will be waived only for emergencies and at the discretion of the clinician.

D. Balances that remain unpaid after 60 days will be reported to a collection and credit agency.

The unique and comprehensive nature of our practice prevents us from participating directly with insurances. Payment is expected at the time of service. APPS will provide a receipt for services rendered that can be submitted to insurance companies for reimbursement.

Tricare patients recognize APPS as an out of network treatment practice and agree to pay APPS clinicians their rates and fees with no expectation for additional government fee caps or reimbursements.

I have received a copy of the APPS Fee Schedule and Policy Sheet and agree with its terms.

Signature: _____ **Date:** _____