



## BILLING RIGHTS AND DUTIES

Welcome to Sacred Heart Healing Ministries. We are pleased to have the opportunity to serve you and hope that this agreement will serve to provide information helpful in making an informed decision concerning our services.

**APPOINTMENTS:** Our services are unique and set up differently than traditional therapy. Treatment is conducted over a one to two-week period, depending on the needs identified in the consultation, Monday through Friday (usually). Most treatment is provided in Steubenville, OH, other locations may be available at an extra cost. All scheduling has to be done in advance. You will be asked to pay half the fee to secure the agreed upon dates. The week(s) will not be guaranteed until the money has been received. Fees are based on the entire treatment week, except for those 6 and under. All fees quoted are in United States dollars.

### FEE AND GENERAL SCHEDULE:

**Adults: \$5,500.00 per week** – Typical treatment hours are **two** 2.5-3-hour periods each day M-F of the treatment week.

**7-17: \$3,000.00** - Treatment hours are shorter due to their particular attention spans and speed of processing trauma. Typically one 2.5-3 hour period is conducted each day of the treatment week M-F.

**6 and under: \$175.00 per hour** Children this age generally work very quickly – the schedule will be determined on a case by case basis but usually no more than an hour or two a day.

**DEPOSIT:** The fee includes the initial consultation. Half of the fee is paid to secure the dates of treatment and is **NON-REFUNDABLE**. If you reserve the date and are not able to attend, we do not have time to secure another client for that week. The other half is due on the first day of treatment.

Fees can be paid through PayPal (link on our website Sacred Heart Healing Ministries.com) or by check made payable to **Margaret Vasquez**. If paying in non-U.S. currency, the fee **MUST** be paid through PayPal.

**INSURANCE:** Most insurance plans do not cover this type of intensive treatment. Currently there are no insurance billing “codes” that cover this type of intensive treatment, therefore we **do not bill to insurances**.

**POST ADOPTION SPECIAL SERVICES SUBSIDY:** Many states have special funding for post adoptive families. Check with your state and county to see if funds are available for this specialized treatment. Ohio generally funds this treatment. **Please note: even if using PASSS funding, the deposit must be made to secure your week.**

**LODGING AND OTHER EXPENSES:** All travel, lodging and food expenses are your responsibility. We can make recommendations for lodging but do not endorse any particular place.

**MINORS:** A parent or legal guardian must accompany a minor and consent to treatment, unless otherwise stipulated by law. Parents or legal guardian must comply with the terms of this billing policy.

**CANCELLATION/NO SHOW POLICY:** Cancellations of the scheduled week needs to be received 4 weeks in advance of the week scheduled. At that point, we will keep your deposit so you can schedule another week. If you cancel within the four-week period or do not show for your scheduled week the deposit is **NON-REFUNDABLE** or transferable.

I have read and understand the “Sacred Heart Healing Ministries Billing Rights and Duties”, and have received a copy and agree to abide by its terms. **I accept full responsibility for the balance on my account.**

\_\_\_\_\_  
Client's Name (please print)  
(or parent/guardian if minor)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date