Powers Ferry Psychological Associates, L.L.C.

1827 Powers Ferry Rd., Bldg.22, Atlanta, Ga. 30339 770-953-4744x35 Fax: 770-953-4640

Alan Stewart, Ph.D. Fee Schedule & Assignment of Benefits

Dr. Stewart is out-of-network for insurance purposes. These rates take effect January 1, 2025. Hourly rates increase \$10 every succeeding January 1st.

\$12

yearly

• Annual Administrative Fee

•	Individual or Couples Therapy 90791, 90837, 90846, 90847 – Initial sessions are 90 minutes	\$210	per hour
•	Group Therapy 90853	\$110	per hour
•	Psychological Testing Materials Fee	\$260	
•	Psychological Testing Includes interview, administration, scoring, interpretation, report writing, feedback (96139). Dr. Stewart's Psychological Services Contract and Informed Consent Form cont		
•	Other Services (excluding Legal/Forensic Services) Includes report / letter writing, telephone calls longer than 10 minutes, e-mails longer that copying, mailing, etc. Prorated based on the amount of time spent at the hourly rate	\$210 an 10 minutes	per hour s, record
•	Legal/Forensic Services	\$460	per hour
•	Missed/Late Cancellation of a Therapy Appointment with less than 24 hours / one day's notice	Usual hourly fee	
•	Missed/Late Cancellation of a Testing Appointment with less than 24 hours / one day's notice	Deposited Amount	
	I understand that regardless of my insurance status, I am ultimately remy account for any professional services rendered.	sponsible	for the balance
	I understand and agree to pay the above fee schedule if I fail to cance hours or miss the appointment except in case of emergency.	l my appo	intment within
S	ignature of Patient or Guardian Date		
S	ignature of Psychologist Date		