

Powers Ferry Psychological Associates, L.L.C.

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

Ronnise Owens, Psy.D., MPH, - Fee Schedule & Assignment of Benefits

- Annual Administrative Fee \$12 yearly
- Initial Consultation Sessions \$300 per hour
90791 - at least 53 min and not more than 90 min
- Individual Therapy \$200 per hour
90837 – ≥ 53 minutes
- Neuropsychological Testing Material Fee (one time) \$250
- Neuropsychological Testing \$250 per hour
96130 – 96133, 96136 – 96139
Includes administration, scoring, interpretation, report writing
- Other Services - to include: \$250 per hour
report / letter writing, telephone calls longer than 5 minutes, e-mails longer than 5 minutes, record copying, mailing, etc. prorated based on the amount of time spent at the hourly rate.
- Legal Work (DEPOSIT REQUIRED) \$400 per hour
- Missed/Late Cancellation of an Appointment or Testing \$400 & up
Within less than 5 days' notice
- Missed Appointment/Late Cancellations (non-testing) \$ 185
Includes cancellations with less than 24 hour notice on business days

1. I understand that regardless of my insurance status, I am ultimately responsible for the balance on my account for any professional services rendered.

2. I hereby authorize and request the insurer(s) that I or my child am covered under to pay directly to Ronnise Owens, Psy.D., MPH any benefits due under the terms of this policy for services rendered to the following address: 1827 Powers Ferry Rd. Bldg 22, Marietta, Ga. 30339.

3. I understand and agree to pay the above fee schedule if I fail to cancel my appointment within 24 hours or miss the appointment except in case of emergency.

signature of patient or guardian

date

signature of neuropsychologist

date