

Good Faith Estimate

If you engage in services with RAFT Counseling and do not wish to use your insurance benefits, you have the right to an individualized good faith estimate. This is a generalized version of a Good Faith Estimate for services provided by RAFT.

Client Services and Diagnosis:

Primary Service Requested/Scheduled and Service code: 90791, 90837, 90834. First session and on-going sessions 45-55 minutes long to be assessed and determined.

Primary Diagnosis and Code (if known): To be assessed and determined

Secondary Diagnosis and Code (if known): To be assessed and determined

If scheduled, date(s) the service will be provided:

Provider/Facility Information:

Facility Name: Turecek PLLC dba RAFT Counseling. AKA dba RAFT Consulting and RAFT

Tax ID: 83-2030626

Address: 19641 E Parker Square Dr. Suite J. Parker, CO 80134

Provider Names and NPI Numbers: Amanda Turecek – 1841602513

Please note that some of our therapists are working towards independent licensure under clinical supervision. The clinical supervisor, or supervisor, may be the therapist listed on invoices and claims. Updated therapist names and NPI numbers will be determined based on who you are working with at RAFT Counseling.

Expected Charges:

The following is a list of expected charges. The estimated costs are valid for 12 months from the date of the Good Faith Estimate.

Service/Item: mental health counseling

Address where service/item will be provided: 19641 E Parker Square Dr. Suite J. Parker, CO 80134

Diagnosis Code: To be determined

Therapist Level: Our therapists rates are based on a tiered private pay system. Levels include interns, level 1, level 2, and level 3. Please see our therapist pages to determine which level the therapist is that you are meeting with. These rates are based on a therapist level 2 and are used as an example only.

Service Code: 90791, 90837, 90834

Quantity: If meeting weekly for one year (52 weeks), with 10 weeks off to include vacation, sick time, holidays, and other appropriate reasons to not meet with your therapist for a weekly appointment.

1 assessment sessions (90791) = \$150

41 on-going 53+ minute therapy sessions (90837) = $\$150 \times 41 = \6150

Expected Cost: \$6150

If meeting monthly for one year (12 months).

1 assessment sessions (90791) = \$150

12 on-going 53+ minute therapy sessions (90837) = $\$150 \times 12 = \$1,800$

Expected Cost: \$1,800

Additional Provider Notes Including Total Estimated Cost: Diagnosis and frequency of meetings varies for all individuals meeting with a therapist with RAFT Counseling. It is not uncommon for clients to meet weekly, bi-weekly, or monthly based on individual goals and progress.