

## Intensive Outpatient Fee Agreement and Payment Policy

- Fees are due at the time of admission or at the beginning of each session for other outpatient services. **FEES ARE NONREFUNDABLE** once a treatment program starts.  
**CD Intensive Outpatient (8 weeks).....\$3,600.00**  
**ED Intensive Outpatient (8 weeks).....\$3,800.00**  
**(Includes nutritional consults)**
- Other services outside our prepaid programs:
  - Evaluation Psychosocial-Testing \$150.00
  - Individual Session \$ 80.00
  - DUI/CD Assessments \$150.00
  - Nutritional Assessment (Followups) \$150.00
  - Psychiatrist/Initial Assessment (if needed) \$400.00
  - Aftercare Group (TPOT Clients) \$ 0.00
  - Aftercare Group (other programs) \$ 20.00
  - Family Weekends \$500.00
  - Urinalysis - Billed by lab
- In the event the guarantor/payer is not present to sign fee agreement, it is understood that you, the client, are ultimately responsible for such charges and that you accept this money as a gift from guarantor/payer to pay said fee and hold harmless Turning Point of Tampa, from any actions that may arise from guarantor/payer regarding this financial agreement.
- I agree that any payments I make may be applied to self pay fees. I understand that any money paid toward my deductible, copays, or room and board will be applied to my outstanding balance should insurance deny coverage at any point in time.
- I authorize the use and disclosure of protected health information related to my treatment and services provided by Turning Point of Tampa for the purpose of financial and collection activities to the following agencies/individuals. I have been informed of the specific type of information that may be requested. I understand this authorization will remain in force for a period not to exceed one (1) year unless otherwise specified by me in writing. I also understand that any disclosure made is bound by Part 2 of Title 42 of the Code of Federal Regulations and hold Turning Point of Tampa harmless of any and all damages, claims, or causes of action arising out of, or in connection with, the release of this information.

I have read the above and **understand the nonrefundable fee agreement** and my financial obligations and agree to abide by the terms of this Agreement. In the event of litigation relating to the subject matter of this Agreement, the non-prevailing party shall reimburse the prevailing party for all reasonable attorney fees and costs resulting therefrom.