

# Rhonna W. Phillips

## Counseling & Therapy Services, LLC

Inquiry/Initial Appt Request and **Screening**  
Oral & written, **Good Faith Estimate (GFE)**

Date: \_\_\_\_\_ Time: \_\_\_\_\_ - \_\_\_\_\_

1. Inquiry is from \_\_\_\_\_ DOB: \_\_\_\_\_ Re whom: \_\_\_\_\_  
\_\_\_\_\_ DOB: \_\_\_\_\_

Ok? Y/N Address: \_\_\_\_\_

Ok? Y/N Email: \_\_\_\_\_

Ok? Y/N Cell- text: \_\_\_\_\_

Ok? Y/N Other Phone: \_\_\_\_\_

2. I am referred to as your "Convening Provider"- responding to your inquiry or request for services and providing you an estimation of the initial costs.

3. The type of Service you are thinking you need? \_\_\_\_\_

4. Your general concern is? \_\_\_\_\_

5. Any safety risks? Y/N \_\_\_\_\_

6. According to the new federal "No Surprises Act" law, you have a right to a Good Faith Estimate (GFE) of services. Thus, I must ensure you have a GFE, before I can determine if we can schedule you, thus charge you. Refer to the GFE Notice posted on my web & in my office. Did you **see my written rates** on my Web site? Y/N Or from my website in my Square appt scheduler? Y/N or elsewhere? \_\_\_\_\_

7. I would like to verbally respond to your specific, personal concerns but will need to set time aside for that. My schedule would allow for your Phone Inquiry appt within 1 week.

8. To begin, you will need an Intake Appt. For an Individual Intake it is 80-90 min for \$135.00. For a Couples/Family Intake it is 1hr 50 min-2hrs for \$260.00. Usually available w/in 1 week. This conversation is **your Oral GFE**.

9. Attached is, or forthcoming will be, my written Payment and Rate Agreement for your signature of acceptance. You may request I send

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**written GFE** pricing for services to your preferred electronic or physical address.

10. Until a session occurs which includes a full assessment, the Diagnosis currently is #Z03.89 for 0 Dx or #R69 for Dx deferred.
11. I am required to ask if you have **health insurance**, that covers mental health services? Y/N Reminder, I do not accept or file insurance. Do you still **intend to submit insurance claims** for services received from me? Y/N I do NOT voluntarily provide Super Bills.
12. I do charge for my time outside of sessions, as Case Management (CM) Services. Traditionally, health insurance does not reimburse for CM services nor for my Counseling as an Out of Network Provider.
13. Steps to officially submit your appt request:  
Go to [www.BirminghamCounselor.com](http://www.BirminghamCounselor.com). Review all the information.
  - A. Click on "Appts", request the service for the "Initial phone Inquiry" a free 15 min phone consultation.
  - B. Next, if you have my go ahead, you can request the "1<sup>st</sup> Appt for Intake", selecting the Intake type we have discussed.
  - C. For both, review my calendar, select your preferred day/time, set up your profile (which includes your payment information), submit your appt request. Watch for my electronic RESPONSE.
14. Once I "accept" your Intake Appt request **your card will be charged for the service at my posted rate and as we discussed.**
15. Now, scroll down in that email for instructions for completing necessary forms. You will be printing out 4-5 forms, to complete at home in about 45 minutes. This saves you talk time with me and ultimately saves you money. Fill out each form. I need **all forms back to me two days in advance of your appt** if we are meeting virtually. If meeting in person, then bring them with you, already completed to the physical address you will find on the "Directions" tab on my website.

Rhonna W. Phillips, MA Licensed Professional Counselor & Supervisor, Licensed Marriage and Family Therapist. Physical loc: 1320 Alford Ave Suite 101 Hoover, AL 35226. NPI: 179 07 13 196 TIN: 81-284 31 23 Rev: 12/2022