

# Soper Counseling Group



John R. Soper, Jr., MA, NCC, LPC & Clinical Associates, LLC

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July 1, 2019

## Fee Schedule

<u>Session Name</u>	<u>CPT Code</u>	<u>Length</u>	<u>Fee</u>
Initial	90791	60 Min	\$300
Extended Individual	90837	60 Min	\$250
Standard Individual	90834	45 Min	\$200
Extended Family/Couples	90847	60 Min	\$250
Standard Family/Couples	90847	45 Min	\$200
Group		45 Min	\$30-50
Additional Time	NA	15 Min	\$60
Urine Drug Testing Onsite	NA	15 Min	\$25
Written Reports	NA	15 Min	\$60

\* = Verification of Attendance Letters are included with the session fee and are offered at no additional cost to the client

Sliding Scale Fees are available. The term "sliding scale" means a departure from the posted fee schedule and is mutually agreed upon between the client and the counselor prior to initiating treatment or if a major life change affects the client's ability to pay fees during treatment.

It is a core belief of this practice to provide truly positive, impactful, counseling services while keeping sharp focus on customer care and satisfaction. Please feel free to inform me immediately if you have any special needs or circumstances that may be present and could inhibit your ability to pay for services. I will make every effort to assure there is no interruption in your counseling services.

Sincerely,

John R. Soper, Jr., MA, NCC, LPC, ACS  
EMDRIA Certified EMDR Therapist  
Approved Clinical Supervisor  
New Jersey Licensed Professional Counselor  
Board Certified National Certified Counselor  
NJ License #: 37PC00041600

**\*\*All appointments must be cancelled 24 hours before your scheduled appointment time, otherwise you will be charged for your missed session\*\***

Patient's signature: \_\_\_\_\_

Signature of parent/guardian/guarantor: \_\_\_\_\_