



**LIN HALEY**

LMFT # 92501  
LPCC # 7091

**Psychotherapy Services Super Bill**

PO Box 285 Glen Ellen CA 95442

707-529-1767

NPI: 1770930992

Client Name	Address	City	State	Zip
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**PROCEDURE:**

**DIAGNOSIS:**

*FOR PROFESSIONAL THERAPY SERVICES PROVIDED ON THE FOLLOWING DATES:*

Date	Name	Procedure	Fee	Pmts	Balance 0.00
1.					

**Please note: As outlined and agreed upon in your original clinical intake paperwork, while I am willing to provide a receipt that you may submit to your insurance company if you choose to do so for a possible out of network reimbursement, I will not fill out forms or work directly with or on your behalf with your health care insurance company. Additionally, is important that you also understand that there is no guarantee that your insurance carrier will cover your therapy sessions as agreed upon prior to our beginning therapy as I am not on insurance panels.**

\_\_\_\_\_  
Client signature

Date: \_\_\_\_\_

\_\_\_\_\_  
Provider signature

Date: \_\_\_\_\_

Lin Haley LMFT

**Services Billed To:**

**Patient:**



**LIN HALEY**

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PO Box 285 Glen Ellen CA 95442 707-318-0566 NPI#1770930992

<b>Patient Information</b>		<b>Dates of Service:</b>	
Policy Holder			
Social Security Number		<b>Service:</b> <b>Diagnosis:</b>	
Street		<i>Psychotherapy</i>	
City, State, Zip		<b>Fee per Session:</b>	<b>Total Sessions</b>
Patient		<i>\$110.00</i>	
Male	Female	<b>Total Charges:</b>	
	Birthdate	<b>Adjustments:</b>	N/A
Insurance Carrier		<b>Payments</b>	
Policy No.	Group No.	<b>Late Charges:</b>	N/A
Relationship to Policy Holder		<b>Balance Due:</b>	
		<b>Providers Signature</b>	

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## **PROCEDURE CODES**

**90832** Indiv. Psychotherapy 30 minutes  
**90834** Indiv. Psychotherapy 45 minutes  
**90837** Indiv. Psychotherapy 60 minutes  
**90846** Family (without the patient present)  
**90847** Conjoint or Family  
**90849** Multiple-Family Group

**99050** After office hours  
**99056** In a location other than office  
**99802** Unusual Travel  
**90839** On an emergency basis  
**99071** Educational supplies (books, tapes, etc.)  
**99075** Medical Testimony  
**99080** Special Reports  
**90889** Report Writing

### **Other Treatment Modalities**

**90880** Hypnotherapy

Life/Business Coaching

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