



Counseling Northwest

Mill Creek Office Park
16000 Bothell-Everett Hwy Ste. 270
Mill Creek, WA 98012

Mailing Address:
16212 Bothell-Everett Highway
PMB #131
Mill Creek, WA 98012

GOOD FAITH ESTIMATE

Matthew R. Evich

NPI#: 1477782993

Per Session Rates:

Intake (90791): \$175

53' Session (90837): \$150

I am not able to propose an appropriate diagnosis or course of treatment for you until we have spent some time together. As soon as I am able to identify a diagnosis and an appropriate course of treatment, I will discuss it with you.

Services are anticipated to be provided generally on a weekly basis until treatment is terminated. Additional services may be recommended. This estimate of your costs is only an estimate, and your actual charges may differ. You have the right to initiate the patient-provider dispute resolution process if the charges you are billed substantially exceed the expected charges in this estimate. You may contact me directly if the billed charges are higher than this Good Faith Estimate, or you can start a dispute resolution process with the U.S. Department of Health and Human Services (HHS) directly. If you choose to use the dispute resolution process, that will not adversely affect the quality of health care services I provide to you. This estimate of costs is not a contract and does not obligate you to obtain clinical services from me. This Good Faith Estimate is effective through the end of 2022.

Client Name _____

Client Date of Birth _____

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