



**RYAN A. LEWIS, M.A., LMHC**  
Psychotherapist

## **BUSINESS HOURS, FEES & PAYMENT POLICIES**

- ⇒ **Mon. - Fri. AM** / (50-Mins.) 8-8:50AM, 9-9:50AM, 10-10:50AM, 11-11:50AM / (75-Mins.) 11AM-12:15PM.
- ⇒ **Mon. - Fri. PM** / (50-Mins.) 3:00-3:50PM, 4:00-4:50PM, 5:00-5:50PM / (75-Mins.) 5:00-6:15PM.

- ⇒ **Individual** therapy is \$145 for a 50-minute session.
- ⇒ **Couples** counseling is \$165 for a 50-min. session or \$185 for a 75-min. session.
- ⇒ **Family** therapy is \$185 for a 75-minute session.
- ⇒ **Group** therapy is \$85 per member for a 90-minute group session. (Minimum 4 members)
- ⇒ **Formal Documentation, Assessment & Diagnosis** is \$225 /hr.

### **Payment and Cancellation Policy:**

**Cancellations** must be made within 24 hours of your next appointment so that your scheduled time can be used by others seeking services. If you do not cancel within 24 hours, you will be charged your usual fee.

### **Payment**

I require payment in-full at the time of our session. I accept cash, checks, debit or credit cards. A \$25 check return fee will be applied to all returned checks.

### **Insurance:**

I am an out-of-network provider with most insurance plans. If you have mental health coverage through a health insurance plan, I will electronically file for you to seek out-of-network reimbursement benefits. However, please contact your insurance provider before the time of service and check your out-of-network eligibility, deductible and benefits coverage. Please also ensure that preauthorization is not required for Behavioral or Mental Health services.

Thank you.

**RYAN A. LEWIS, M.A., LMHC**  
DBA: **RYAN LEWIS COUNSELING & PSYCHOTHERAPY**  
CLINICIAN'S CREDENTIALS: **LH60321405**  
CLINICIAN'S TAX ID: **602 946 754**  
DIAGNOSTIC CODE: **TBD**

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