**Maria Baratta, LCSW, PhD**

**Psychotherapy NYS # R029705 / NJ # 44SC01490800**

**5o Hempstead Avenue Suite L, Lynbrook, New York 11563**

**tel/fax 212 787-9800, 516-490-9400** [**mbarmail@aol.com**](mailto:mbarmail@aol.com)

**Good Faith Estimate**

|  |  |
| --- | --- |
| PATIENT INFORMATION |  |
| Name |  |
| Date of Birth |  |
| Address |  |
| Phone Number |  |
| Email Address |  |
| Primary Service Requested/Scheduled | 45 Minute Psychotherapy Session |
| In office/ telehealth |  |

The following is a detailed list of expected charges -

45 MINUTE PSYCHOTHERAPY SESSION, for \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ scheduled frequency

The estimated cost is based on per session basis and is valid for 12 months from the date of this GFE.

|  |  |
| --- | --- |
| PROVIDER INFORMATION |  |
| Provider Name | Maria Baratta, LCSW, PhD |
| Provider Address | 50 Hempstead Ave, Suite L, Lynbrook, NY 11563 |
| Provider Phone Number | 516 490 9400, 212 787 9800 |
| National Provider Identifier | 1508963109 |
| Service | 45 Minute Psychotherapy Session |
| Address where service will be provided | In office/ Telehealth |
| Diagnosis Code |  |
| Service Code | 90834 90832 90847 90791 modifier 95 |
| **Cost per Service** |  |

DATE OF GOOD FAITH ESTIMATE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_