Client Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_



**Fees for Compassion-Focused Therapy Group for Adults with Eating Disorders**

This is a group treatment program for clients aged 18 and over. Clients will learn to manage their tricky minds, including their self-critical “eating disorder voice,” with more compassion. Therapy will consist of a total of 12 weekly 2-hour group sessions led by senior doctoral students and pre-doctoral residents in clinical psychology. The program is supervised by a registered clinical psychologist.

Listed below is a standard income-based fee scale for psychological services.

* While the recommended rate from the Ontario Psychological Association for group or individual psychological services is $225/hour, as a training site we provide services at a lower cost. Please use the Fee Schedule to determine the fee that applies to you.
* If you are on social services, have no income, or would like to discuss your fees, please speak with the Director of the Centre for Mental Health Research at 519-888-4567, ext. 33171.
* Many extended health insurance carriers reimburse fees for psychological services, either wholly or partially. We encourage all clients to please check with their insurance plan to determine if the services provided to you by the CMHR would be approved for reimbursement.

**Combined Family Income Suggested Weekly**

 **Annual Salary Group Therapy Fee (2-hr sessions)**

|  |  |
| --- | --- |
| >100K90-99K80-89K70-79K60-69K 50-59K40-49K30-39K≤30K |  $100.0095.0090.0085.0080.0075.0070.0065.0060.00 |

I will pay $ \_\_\_\_\_\_\_ per 2-hour weekly session of treatment. (Please note that this fee may be re-negotiated at a later time if your situation changes.)

Please note the following policy on **missed, late, or cancelled sessions**.

We require that you notify your clinician at least 24 hours in advance if you cannot make a session. You may leave a voicemail message at the Centre to notify us that you cannot make a session at (519) 888-4567, ext. 33842. You will be charged for sessions that are missed without giving such notice, barring (of course) emergencies and sudden illness. If you arrive more than 20 minutes late for a session, the clinician will be unable to provide you with any service as this does not leave enough time.

Client Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_