



## **Good Faith Estimate (NO SURPRISES ACT)**

### **GreenSpace Counseling, LLC**

#### **Good Faith Estimate Notice**

Effective Date: March 2021

Last Updated: January 2026

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### **Your Right to a Good Faith Estimate**

You have the right to receive a Good Faith Estimate explaining how much your mental health care may cost if you are uninsured or self-pay.

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### **What Is Included**

The estimate reflects expected charges based on information available at the time and is not a guarantee of final costs.

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### **Dispute Resolution**

If you receive a bill that is \$400 or more above your Good Faith Estimate, you may dispute the charges through the federal patient-provider dispute resolution process.

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### **How to Request**

You may request a Good Faith Estimate before scheduling services or at any time during treatment.