CONCORDIA-HEALTH
ACCESS HEALTHCARE FOR ALL

Concordia-Health
Official Legal Address
1901 Pennsylvania Avenue NW
Washington, DC 20006
United States
www.concordia-health.org

CONCORDIA-HEALTH BENEFIT

Psychological Support

- Beneficiary :
- Address :
- Member ID No. :
- S.S.N. :

Conditions of Support :

Concordia Health provides support of USD 20.00 per session (not exceeding the beneficiary's out-of-pocket expense) when the session is conducted by a licensed psychologist or mental health professional.
Support is granted upon presentation of a duly completed treatment certificate and proof of payment for each session.

This benefit is limited to a maximum of 8 sessions per calendar year per beneficiary.

To be eligible for this benefit, the member must be affiliated with Concordia Health.

Only the official terms of the Concordia Health Mutual Aid Program define the rights and obligations of members.

Section completed by the psychologist :

I, the undersigned, ... hereby declare that I hold a degree in psychology and am licensed as a mental health professional. I confirm that the patient ..... has attended the sessions indicated.

Date	Amount Paid	Psychologist Identification Number	Signature and Possible Stamp of the Psychologist

Please note: Do not forget to attach proof of payment.

End of Form – CH-PSY-001 (v1.0)