

JUDITH L SILVAN, LICSW
judysilvanpsychotherapy.com
judysilvan@mac.com
617-596-1403
NPI# 101 308 4458
EIN # 47 2876357
Receipt for Psychotherapy/Patient
(Reimbursement Super-Bill):

Name:

Insurance ID:

Date of Birth:

Date(s) of Service:

Place of Service:

49 Hancock St Cambridge, MA 02139/66 Reed
Street Ct #1, Cambridge, MA 02140

Individual Therapy, 50", ICD-10 Code: F41.9
Procedure Code: 90837

Fee: \$350 per session

TOTAL PAID:

PAID IN FULL.



Judith L Silvan, LICSW

