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PRACTICE POLICIES

APPOINTMENTS, FEES, AND CANCELLATIONS

FREE CONSULTATION I offer one free 30 minute consultation to all potential clients.

INSURANCE I take Optum/United and Anthem Blue Cross/Blue Shield Insurance. I am in their network and will file for you. It is your responsibility to call and find out your specific benefits for mental health “telehealth” visits. You will want to find out if they have a limit on how many sessions you can be seen, if you have a copay, and what your deductible is. If you have a deductible that is not yet met for the year, you will be responsible for the full cost of the sessions until it is met. If you have a copay, you will be charged that amount at every session. I will have to charge you for any balance that insurance doesn't pay. The fees for the sessions for clients who use insurance pay are \$150 for the first diagnostic appointment and \$120 per psychotherapy session thereafter.

SELF PAY Clients who do not have insurance and pay out of pocket pay a discounted fee of \$95 per 50 minute session, including the first diagnostic appointment. Due to the discounted fee, insurance companies will not reimburse if you later decide to turn it in to them.

MISSED/CANCELLED APPOINTMENTS Cancellations and re-scheduled sessions will be subject to a full charge if **NOT RECEIVED AT LEAST 24 HOURS IN ADVANCE**. This is necessary because a time slot is held exclusively for you. If you are late for a session, you may lose some of that session time. Please remember to cancel or reschedule 24 hours in advance. Insurance companies do not pay for missed appointments.

TELEPHONE ACCESSIBILITY If you need to contact me between sessions, please text me or leave a message on my voicemail. I am often not immediately available; however, I will attempt to return your message within 24 hours. If a true emergency situation arises, such as suicidal thoughts, please call 911 or any local emergency room.

SOCIAL MEDIA Due to the importance of your confidentiality and the importance of minimizing dual relationships, I do not accept friend or contact requests from current or former clients on any social networking site (Facebook, Instagram, Snapchat, LinkedIn, etc). I believe that adding clients as friends or contacts on these sites can compromise your confidentiality and our respective privacy. It may also blur the boundaries of our therapeutic relationship. If you have questions about this, please bring them up when we meet and we can talk more about it.

ELECTRONIC COMMUNICATION I cannot ensure the confidentiality of any form of communication through electronic media, including text messages. If you prefer to communicate via email or text messaging for issues regarding scheduling or cancellations, I will do so. While I may try to return messages in a timely manner, I cannot guarantee immediate response and

request that you do not use these methods of communication to discuss therapeutic content and/or request assistance for emergencies.

Services by electronic means, including but not limited to telephone communication, the Internet, facsimile machines, and e-mail is considered telemedicine by the State of California. Under the California Telemedicine Act of 1996, telemedicine is broadly defined as the use of information technology to deliver medical services and information from one location to another. If you and your therapist chose to use information technology for some or all of your treatment, you need to understand that: (1) You retain the option to withhold or withdraw consent at any time without affecting the right to future care or treatment or risking the loss or withdrawal of any program benefits to which you would otherwise be entitled. (2) All existing confidentiality protections are equally applicable. (3) Your access to all medical information transmitted during a telemedicine consultation is guaranteed, and copies of this information are available for a reasonable fee. (4) Dissemination of any of your identifiable images or information from the telemedicine interaction to researchers or other entities shall not occur without your consent. (5) There are potential risks, consequences, and benefits of telemedicine. Potential benefits include, but are not limited to improved communication capabilities, providing convenient access to up-to-date information, consultations, support, reduced costs, improved quality, change in the conditions of practice, improved access to therapy, better continuity of care, and reduction of lost work time and travel costs. Effective therapy is often facilitated when the therapist gathers within a session or a series of sessions, a multitude of observations, information, and experiences about the client. Therapists may make clinical assessments, diagnosis, and interventions based not only on direct verbal or auditory communications, written reports, and third person consultations, but also from direct visual and olfactory observations, information, and experiences. When using information technology in therapy services, potential risks include, but are not limited to the therapist's inability to make visual and olfactory observations of clinically or therapeutically potentially relevant issues such as: your physical condition including deformities, apparent height and weight, body type, attractiveness relative to social and cultural norms or standards, gait and motor coordination, posture, work speed, any noteworthy mannerism or gestures, physical or medical conditions including bruises or injuries, basic grooming and hygiene including appropriateness of dress, eye contact (including any changes in the previously listed issues), sex, chronological and apparent age, ethnicity, facial and body language, and congruence of language and facial or bodily expression. Potential consequences thus include the therapist not being aware of what he or she would consider important information, that you may not recognize as significant to present verbally the therapist.

MINORS If you are a minor, your parents may be legally entitled to some information about your therapy. I will discuss with you and your parents what information is appropriate for them to receive and which issues are more appropriately kept confidential.

TERMINATION Ending relationships can be difficult. Therefore, it is important to have a termination process in order to achieve some closure. The appropriate length of the termination depends on the length and intensity of the treatment. I may terminate treatment after appropriate discussion with you and a termination process if I determine that the psychotherapy is not being effectively used or if you are in default on payment. I will not terminate the

therapeutic relationship without first discussing and exploring the reasons and purpose of terminating. If therapy is terminated for any reason or you request another therapist, I will provide you with a list of qualified psychotherapists to treat you. You may also choose someone on your own or from another referral source. If you move out of the state of Indiana, I must terminate the therapeutic relationship, as I am only licensed to provide psychotherapy in Indiana. If this happens, the earlier we plan for this the better, so you can find care in your new state of residence.

Should you fail to schedule an appointment for three consecutive weeks, unless other arrangements have been made in advance, for legal and ethical reasons, I must consider the professional relationship discontinued.

BY CLICKING ON THE CHECKBOX BELOW I AM AGREEING THAT I HAVE READ, UNDERSTOOD AND AGREE TO THE ITEMS CONTAINED IN THIS DOCUMENT.