

WELCOME TO PSYCHWISE SERVICES

CLIENT AGREEMENT (Policy & Procedures)

This document (the Client Agreement) contains information about Psychwise Services business policies. It also contains a summary about the Health Insurance Portability and Accountability Act (HIPAA), a federal law which provides privacy protection and client rights regarding the use and disclosure of your Protected Health Information (PHI) which maybe used for the treatment, payment and health care operations. HIPAA requires all providers give their patients copies of a Notice of Privacy Practices related to the use of PHI for treatment, payment and health care operations. The Notice, which is attached to this Agreement, explains HIPAA and its application to your personal health information in greater detail. By law, your signature is required to acknowledge you have been given this information by the end of the session. Although these documents are long and sometimes complex, you should read them carefully before the next session. Any questions about the procedures can be discussed at that time. When you sign this document, it will also represents an agreement between yourself and Psychwise Services.

PSYCHOTHERAPY / COUNSELING SERVICES

Psychotherapy is not easily described in general statements. It varies depending on the personalities of the counselor and client as well as the particular problems you are experiencing. There are many different methods that your therapist can use to deal with the problems you hope to address. Psychotherapy is somewhat like a medical doctor visit that calls for an active effort on your part. In order for the therapy (or course of your medical treatment) to be most successful, you will have to work on things discussed during your sessions as well as on your own between sessions.

Psychotherapy can have benefits and risks. Since therapy often involves discussion about unpleasant aspects of your life, you may experience uncomfortable feelings like anxiety, sadness, guilt, anger, frustration, loneliness and helplessness. On the other hand psychotherapy has also been scientifically proven to have benefits for people who go through it. Therapy often leads to better relationships, solutions to specific problems, and significant reductions in feelings of distress. But, there are no guarantees of what you will experience.

The initial sessions will involve an evaluation of your needs (or those of your child). By the end of the evaluation, your therapist will be able to offer you an impression of what your treatment will include, if you decide to continue with therapy. You should evaluate this information along with your own opinions of whether you feel comfortable working with the therapist. Therapy involves a commitment of time, money and energy, so you should be very careful about the therapist you ultimately select. If you have questions about any procedures, you should discuss them whenever they arise. If doubts persist, your therapist will be happy to help you set up a meeting with another mental health professional for a second opinion.

MEETINGS

The assessment and evaluation process will last about one to three sessions. In that time, you can decide if the therapist is the best person to provide the services you need in order to meet your treatment goals. If psychotherapy is begun, follow up sessions are 45 to 50-minute session on a

frequency that will best promote improvement. Once an appointment is scheduled, you will be expected to pay for it unless you provide at least a minimum of 24 hours advance notice that you are canceling so that your therapist may offer the appointment to someone else. **Appointments not cancelled at least 24 hours in advance will be billed \$50.00 to the client and cannot be billed to, nor reimbursed by your insurance.**

PROFESSIONAL FEES

Psychotherapy fees are for a 45 to 65 minute session. In addition to the sessions, Psychwise Services charges for other professional services you may need. These typically include report writing, telephone conversations lasting longer than 10 minutes, consulting with other professionals with your permission, preparation of records or treatment summaries, and the time spent performing any other services you may request.

BILLING AND PAYMENTS

You will be expected to pay in full for each session at the time it is held. You will be provided with all the required documentation to file claims with your insurance company. For insurance companies that your therapist is in-network with, Psychwise Services will bill your insurance on your behalf for their portion; however, any deductibles, co-pays and/or applicable fees are **due at the time of your office visit**. We accept payment by, checks, credit/debit cards (Visa, MasterCard, Discover, American Express) or cash.

In the event of a returned check due to insufficient funds, there will be a \$35.00 charge plus any incurred bank fees that will be added to your account. From then on, only credit/debit cards or cash will be accepted. Outstanding balances may not exceed the charges for two sessions for the continuation of ongoing services. If your account has not been paid for in more than 60 days and arrangements for payment have not been agreed upon, Psychwise Services has the option of using legal means to secure payment. This may involve hiring a collection agency. If such legal action is necessary, its costs will be included in the claim. In most collection situations, the only information released regarding a client's treatment is his/her name, the nature of services provided, and the amount due.

TELEPHONE CONTACT

Due to your therapist being in session, your calls may go to voice mail. She will make every effort to return your call on the same day you place it. This may not always include weekends or holidays. **If you have an emergency that cannot reasonably wait until the end of the business day, you are urged to call 911 or go to the nearest emergency room.** If your therapist will be unavailable for an extended period of time, your therapist will provide you with the name of a colleague to contact, if necessary.

PROFESSIONAL RECORDS

The laws and standards of mental health care require Psychwise Services to keep treatment records. You are entitled to receive a copy of your records, or summary of it can be prepared for you instead. Because these are professional records, they can be misinterpreted and/or upsetting to untrained readers. If you wish to see your records, it is recommend you review with your therapist present so that the contents can be discussed or you can have them forwarded directly to another health professional with an appropriately completed authorization form.

MINORS AND THERAPY

Clients under 12 years of age and their parents should be aware that Illinois law allows parents to examine their child's treatment records. Parents of children between 12 and 18 years old cannot examine their child's records unless the child consents and unless Psychwise Services find that there

are no compelling reasons for denying access. Parents are entitled to information concerning their child's current physical and mental condition, diagnosis, treatment needs, services provided, and services needed.

Prior to beginning treatment with a child/minor, it is important you understand the therapist's approach to child therapy and agree to some rules about your child's confidentiality during the course of his/her treatment. Therapy is most effective when a trusting relationship exists between the counselor and client. It is often necessary for children to develop a "zone of privacy" whereby they feel free to discuss personal matters with greater freedom. This is particularly true for adolescents who are naturally developing a greater sense of independence and autonomy.

It is Psychwise Service's policy to provide you with information about treatment status. However, it will not always be shared with you what your child has disclosed without your child's consent. You will be told if your child does not attend sessions.

If your child is an adolescent, it is possible that he/she will reveal sensitive information regarding sexual contact, alcohol and drug use, or other potentially problematic behaviors. Sometimes these behaviors are within the range of normal adolescent experimentation, but other times they may require parental intervention. Your feelings and opinions regarding acceptable behavior must be discussed carefully and openly. If the counselor ever believes your child is at serious risk of harming him/herself or another, you will be informed.

Although your child's counselor's responsibility to your child may require their involvement in conflicts between the two of you, Psychwise Services needs your agreement that the counselor's involvement will be strictly limited to that which will benefit your child.

LIMITS ON CONFIDENTIALITY

The law protects the privacy of all communications between a client and a psychotherapist. In most situations, a counselor can only release information about your (or your child's) treatment to others if you sign a written authorization form. However, authorization is not required in situations in which the psychotherapist is legally obligated to act:

- If they have reasonable cause to believe that a child under 18 known to him/her in a professional capacity may be an abused or neglected child, Illinois law requires that they file a report with the office of the Department of Children and Family Services.
- If the counselor has reason to believe that an adult over the age of 60 living in a domestic situation has been abused or neglected in the preceding 12 months, Illinois law requires that the counselor file a report with the agency designated to receive such reports by the Department of Aging.
- If you have made a specific threat of violence against another or if the counselor believes you present a clear, imminent risk of serious physical harm to another, the counselor may be required to disclose information in order to take protective actions. These actions may include notifying the potential victim, contacting the police or seeking hospitalization.
- If the counselor believes that you present a clear, imminent risk of serious physical or mental injury or death to yourself, they may be required to disclose information in order to take protective actions. These actions may include seeking your hospitalization or contacting family members or others who can assist in protecting you. If such a situation arises, the counselor will make every effort to discuss it with you before taking any action, as appropriate, and will limit disclosure to what is necessary.

These situations have rarely occurred in this practice. If a similar situation occurs, Psychwise Services will make every effort to fully discuss it with you before taking action.

A psychotherapist may occasionally find it helpful to consult other professionals about a case. During a consultation, every effort is made to avoid revealing the identity of a client. The consultant is also legally bound to keep the information confidential. If you don't object, you will not be told about these consultations unless the counselor feels it is important to your work together.

While this written summary of exceptions to confidentiality should prove helpful in informing you about potential problems, it is important that you discuss any questions or concerns that you may have at your next session.