**COUPLES CLIENT SERVICE CONTRACT**

Welcome to Kentlands Psychotherapy. This document contains important information about our professional services and business policies. Please read it carefully and jot down any questions you might have so that we can discuss them at our next meeting. When you sign this document, it will represent an agreement between you and your therapist (Psychologist and/or Psychiatrist).

**PSYCHOTHERAPY SERVICES**

Psychotherapy is not easily described in general statements. It varies depending on the personalities of the psychologist/psychiatrist and patient, and the particular problems you bring forward. There are many different methods I may use to deal with the problems that you hope to address. Psychotherapy is not like a medical doctor visit. Instead, it calls for a very active effort on your part. In order for the therapy to be most successful, you will have to work on things we talk about both during our sessions and at home.

Psychotherapy can have benefits and risks. Since therapy often involves discussing unpleasant aspects of your life, you may experience uncomfortable feelings like sadness, guilt, anger, frustration, loneliness, and helplessness. On the other hand, psychotherapy has also been shown 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.

Our first few sessions will involve an evaluation of your needs. By the end of the evaluation, I will be able to offer you some first impressions of what our work will include and a treatment plan to follow, if you decide to continue with therapy. You should evaluate this information along with your own opinions of whether you feel comfortable working with me. I will also suggest alternative therapist and therapy approaches (schools of treatment) if I feel your needs would be better met with a different type of mental health provider. Therapy involves a large commitment of time, money, and energy, so you should be very careful about the therapist you select. If you have questions about my procedures, we should discuss them whenever they arise. If your doubts persist, I will be happy to help you set up a meeting with another mental health professional for a second opinion.

**MEDICATIONS**

There might be situations in which medication will be recommended to you. We at Kentlands Psychotherapy highly value informed consent for any treatment, including medications. The informed consent process is an important communication process between you and your psychiatrist. You will always receive the following basic information: the nature of the proposed treatment, the risks and benefits of the proposed treatment, alternatives to the proposed treatment, the risks and benefits of alternative treatments, and the risks and benefits of pursuing no treatment. You will also be given the opportunity to ask questions and make sure you understand the treatment recommendations. You will then be prescribed medication only after you have given your consent. Consent to treatment is also a continuous process. You will always be encouraged to discuss ongoing medication use, including possible side effects, need for continued treatment, and stopping a medication. You will always be welcome to contact your psychiatrist between appointments if possible side effects or other problems arise.

**SESSIONS AND CANCELLATION POLICY**

Evaluations are normally conducted during the first 2-3 sessions. During this time, you and your therapist will determine the type of treatment that might help you and whether that therapist is the best person to provide the services you need in order to meet your treatment goals. If psychotherapy is begun, one to two 50-minute sessions per week is typical. In some cases, sessions may be longer or sessions may be more frequent depending upon the goals of the treatment. In some cases, more intensive psychotherapy may be recommended at a greater frequency. **Once an appointment hour is scheduled, you will be expected to pay for it unless you provide 24 hours advance notice of the cancellation (48 hours for psychiatric appointments) unless we both agree that you were unable to attend due to circumstances beyond your control.** Exceptions to this policy are generally what would be considered by reasonable people to be serious illness or emergencies and would not include professional demands or childcare accessibility. If possible, your provider will try to find another time to reschedule that appointment, generally during that same week.

**CONSULTATION SERVICES**

Evaluations conducted for purposes other than to initiate psychotherapy or medications are generally more labor intensive and require significantly more time to complete and write up. In these cases, report preparation fees and other related expenses will be involved. We will discuss this as it relates to your unique circumstances prior to beginning the evaluation process.

**PROFESSIONAL FEES**

**Psychotherapy or medications**: Please inquire with your therapist about his or her hourly fee (45-50 minute hour). In addition to weekly appointments, there will be a fee for other professional services at a prorated rate. Other services include report writing (not to include the standard record keeping of your sessions), telephone conversations lasting longer than brief administrative calls (appointment rescheduling or quick questions), requested calls for follow-up from your therapist (for example after initiating a prescribed medication), attendance at meetings with other professionals you have authorized, preparation of records or treatment summaries, and the time spend performing any other service you may have request of your provider.

**Consultation**: If you become involved in legal proceedings that require his or her participation, you will be expected to pay for their professional time even if they are called to testify by another party. Because of the difficulty of legal involvement, we charge $250 per hour for preparation and attendance at any legal proceeding.

**BILLING AND PAYMENTS**

The hourly fees are set individually by our clinicians. This should be covered during your initial contact with the office or your provider. The fee for psychoanalysis (intensive individual treatment generally meeting 3-4 times/week will be negotiated at a separate rate and payment process than from your providers standard requirements. You will be expected to pay for your sessions at the time of service, unless we agree otherwise. Fees include payments for cancellations that are made with less than 24 hours’ notice (48 hours for psychiatrist) unless otherwise agreed upon.

# INSURANCE REIMBURSEMENT

In order for us to set realistic treatment goals and priorities, it is important to evaluate what resources you have available to pay for your treatment. If you have a health insurance policy, it will usually provide some coverage for mental health treatment. I will fill out forms and provide you with whatever assistance I can in helping you receive the benefits to which you are entitled; however, you (not your insurance company) are responsible for full payment of my fees. It is very important that you find out exactly what mental health services your insurance policy covers.

You should carefully read the section in your insurance coverage booklet that describes mental health services. If you have questions about the coverage, call your plan administrator. Of course I will provide you with whatever information I can based on my experience and will be happy to help you in understanding the information you receive from your insurance company. If it is necessary to clear confusion, I will be willing to call the company on your behalf.

Due to the rising costs of health care, insurance benefits have increasingly become more complex. It is sometimes difficult to determine exactly how much mental health coverage is available. “Managed Health Care” plans such as HMOs and PPOs often require authorization before they provide reimbursement for mental health services. Sometimes they require you see a provider on their list in order for you to utilize your benefits. I am not currently a participant in any HMO or PPO programs and as such may or may not be approved for reimbursement as an “Out of Network” provider. That said these plans are often limited to short-term treatment approaches designed to work out specific psychiatric problems that interfere with a person’s usual level of functioning. It may be necessary to seek approval for more therapy after a certain number of sessions. Additionally you may find that the therapy you desire is not considered medically necessary by your carrier and therefore not covered by your health care insurance coverage. While a lot can be accomplished in short-term therapy, some patients feel that they need more services after insurance benefits end. Some managed-care plans will not allow me to provide services to you once your benefits end. If this is the case, I will do my best to find another provider who will help you continue your psychotherapy.

You should also be aware that most insurance companies require you to authorize me to provide them with a clinical diagnosis. Sometimes I have to provide additional clinical information such as treatment plans or summaries, or copies of the entire record (in rare cases). This information will become part of the insurance company files and will probably be stored in a computer. Though all insurance companies claim to keep such information confidential, I have no control over what they do with it once it is in their hands. In some cases, they may share the information with a national medical information databank. I will provide you with a copy of any report I submit, if you request it.

Once we have all of the information about your insurance coverage, we will discuss what we can expect to accomplish with the benefits that are available and what will happen if they run out before you feel ready to end our sessions. It is important to remember that you always have the right to pay for my services yourself to avoid the problems described above, unless prohibited by contract.

# CONTACTING ME

I am often not immediately available by telephone. While I am usually in my office between 9:30 AM and 12:00 PM on Wednesdays, and 4:00 PM to 9:00 PM on Tuesday and Wednesday evenings, 1:00 PM and 4:00 PM on Sundays, I probably will not answer the phone when I am with a patient. I do have administrative hours from 1:00 PM to 3:00 PM M-F. When I am unavailable, my telephone is answered by voice mail that I monitor frequently. I will make every effort to return your call on the same day you make it, with the exception of weekends and holidays. If you are difficult to reach, please inform me of some times when you will be available. If you are unable to reach me and feel that you can’t wait for me to return your call, contact your family physician or the nearest emergency room and ask for the mental health provider on call. If I will be unavailable for an extended time, I will provide you with the name of a colleague to contact, if necessary.

## PROFESSIONAL RECORDS

The laws and standards of my profession require that I keep treatment records. You are entitled to receive a copy of your records, or I can prepare a summary for you instead. Because these are professional records, they can be misinterpreted and/or upsetting to untrained readers. If you wish to see your psychotherapy treatment records, I recommend that you review them in my presence so that we can discuss the contents. I am willing to conduct a review meeting at least once during your treatment without charge. In most cases these meetings require 10-20 minutes. Meetings to review other evaluations and written reports (such as forensic consultations) will be billed at a prorated consultation rate.

## CONFIDENTIALITY

In general, the privacy of all communications between a patient and a psychologist is protected by law, and I can only release information about our work to others with your written permission. But there are a few exceptions.

In most legal proceedings, you have the right to prevent me from providing any information about your treatment. In some proceedings involving child custody and those in which your emotional condition is an important issue, a judge may order my testimony if he/she determines that the issues demand it.

There are some situations in which I am legally obligated to take action to protect others from harm, even if I have to reveal some information about a patient’s treatment. For example, if I believe that a child or vulnerable adult (such as an elderly person or disabled person) is being abused, I must file a report with the appropriate state agency.

If I believe that a patient is threatening serious bodily harm to another, I am required to take protective actions. These actions may include notifying the potential victim, contacting the police, or seeking hospitalization for the patient. If the patient threatens to harm himself/herself, I may be obligated to seek hospitalization for him/her or to contact family members or others who can help provide protection.

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

I may occasionally find it helpful to consult other professionals about a case. During a consultation, I make every effort to avoid revealing the identity of my patient. The consultant is also legally bound to keep the information confidential. If you don’t object, I will not tell you about these consultations unless I feel that it is important to our work together.

While this written summary of exceptions to confidentiality should prove helpful in informing you about potential problems, it is important that we discuss any questions or concerns that you may have at our next meeting. I will be happy to discuss these issues with you if you need specific advice, but formal legal advice may be needed because the laws governing confidentiality are quite complex, and I am not an attorney. If you request, I will provide you with relevant portions or summaries of the state laws regarding these issues.

Your signatures below indicate that you have read the information in this document and agree to abide by its terms during our professional relationship.

Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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