

OFFICE POLICY STATEMENT

PLEASE KEEP FOR YOUR RECORDS

Purpose of this Statement: Welcome! I hope that our work together will be helpful to your life. This statement is to provide you with information about me and the treatment offered

Qualifications: I received my Master's Degree in Counseling and Family Therapy in 1995 from Seattle Pacific University. In the years since I have worked in a variety of settings. I work with children and adults in family, and individual sessions. I am certified in the State of Washington (#MH30003969).

Approach to Treatment: In our time together I may provide educational information, support, attentive listening and insights into the challenges that you face in your life and bring to the counseling session. I am responsible for developing and implementing a treatment plan that will help you effectively address these challenges. You are responsible for your decisions and level of change. This means that you will need to focus on issues outside of the treatment hour. Given that people and situations are complex, I cannot guarantee that specific changes will occur out of our work together.

Appointments: When you schedule an appointment you are asking me to set aside a time especially for you. As a courtesy to me and to others who may wish to schedule, I require 24 hours notice to be given if you need to cancel. **YOU WILL BE BILLED A NO SHOW CHARGE OF \$100.00 IF 24 HOURS NOTICE IS NOT GIVEN.**

Appointments are 50 minutes in length and begin at the scheduled time. Included in the fifty minutes is the time needed to re-schedule and pay for the session. Please have your check/cash ready in advance. Your payment is expected at each session.

Fees: My fee is \$150.00 for the initial session, \$130.00 for individual sessions lasting 55-60 minutes, \$100 for individual sessions lasting 45-50 minute sessions and \$140.00 for family sessions. This fee will be charged on a prorated basis for any additional time spent in session, telephone consultation, report preparation or other activity. The fees I charge you may be different if your insurance company and I have signed an agreement for me to accept different fees. The fees I will charge you will be included on the separate Signature Page, which we will fill out, and sign together when we meet.

In the unlikely event that your situation leads you to request my help in a legal matter you will be billed according to the legal fee schedule and policies current at the time.

If you choose to pay using your Credit/Debit card, including your HSA VISA card, you will incur a 2.5% charge on your balance owed. Your card will be run every 2 weeks if an outstanding balance is due. I will protect your credit card information by shredding the data once it is inputted into my secure merchant system. If your card is declined you will be charged \$20 per event. If your card is declined twice, you will no longer be able to use this method of payment.

A \$40.00 fee will be charged for any check returned unpaid. If I incur any Bank fees from my bank, those will also be charged to you. A bookkeeping fee of \$5.00 per month will be applied to any unpaid private balance over sixty (60) days past due. Past private balances must be paid in full within ninety (90) days to avoid being sent to collection. If your account is turned over for collection, you will be charged a collection fee in the amount allowed by law at that time.

Confidentiality: Please refer to the Notice of Privacy Practices in this initial packet.

Insurance Billing: There are advantages and disadvantages to utilizing insurance benefits for mental health services. You need to be aware of what it means to participate in insurance-monitored health care. Insurance companies and managed care plans often require information about your treatment to justify or limit your coverage. This sharing of information can compromise your confidentiality. Occasionally therapist notes are reviewed for auditing purposes. More often treatment progress or summary information is required for requesting additional sessions. A diagnosis is required on all insurance claim forms. This information becomes a permanent part of your medical record. When this information goes to your physician it can mean that your health care is more comprehensive. It can also mean that you may have difficulty qualifying for disability or life insurance at a later date.

Emergencies: You may reach me by leaving a message with my voice message service (425) 953-4361. I check for messages several times a day on weekdays and I will return your call as soon as I am able. If your call is urgent please say so. If it is an emergency, use a touch-tone phone to follow the emergency instructions given in the announcement.

In order to help me return calls promptly I use an electronic phone system. Though this system usually means that I am more accessible, occasionally the electronics fail or are updated, (when this happens it is usually for a very short period of time). Therefore, if you do not get through, or if you have not heard from me within 24 hours, please keep calling back. For immediate assistance, you may call the 24-hour crisis line at (425) 258-4357.

Ethics and Accountability: I am certified in the State of Washington (#MH30003969) as a Licensed Mental Health Counselor. I am accountable for my work with you. If you have concerns about the course of treatment, please discuss them with me. If your concerns are not able to be resolved or you feel that I have been unethical or unprofessional you can contact the Department of Licensing in Olympia at (360) 236-4700.

I am a member of the Washington Mental Health Counselors Association. I am committed to the highest standard of professional practice and adhere to both state and organizational codes of ethics.

Ethical guidelines prohibit a social or business relationship between us.

Review of Records: Please refer to the Notice of Privacy Practices in this initial packet.