



Outpatient Services Contract and HIPAA Privacy Policy

This is an opportunity to acquaint you with information relevant to treatment, confidentiality, and office policies. Your therapist will answer any questions you have regarding any of these policies.

We provide psychotherapy services for children, adolescents, adults, couples and families. The first appointment(s) serves as an intake appointment. We will want to hear about the difficulties that led to you making an appointment, goals for therapy, and general information about yourself and your current life situation. By the end of this first appointment, we will give you some initial recommendations on what we think will help. If we do not think we are able to best assist you, we will give you names of other professionals who we believe would work well with your particular issues. If you do not agree with our treatment recommendations or do not think our personality styles will be a good match for you, let us know and we will do our best to suggest a different therapist who may be a better fit.

If you and your therapist decide to work together in therapy, you will collaborate on a treatment plan that incorporates effective strategies to help with whatever difficulties you are hoping to reduce in therapy. Sometimes more than one approach is helpful. Individual, couples and family therapy sessions last 45-60 minutes (depending on your insurance benefits) unless otherwise arranged. Oftentimes, sessions are set for once each week, but this varies based on what seems most appropriate for your particular situation.

Therapy can be extremely helpful and fulfilling, and it takes work both in and out of sessions to be most effective. It requires active involvement, honesty, and openness in order to change thoughts, emotional reactions and/or behaviors. There are benefits and risks to therapy. Potential benefits include increased healthy habits, improved communication and stability in relationships, and lessening of distress. Some potential risks include increased uncomfortable emotions as you self-explore, and changes in dynamics or communication with significant people in your life. Sometimes couples that come for therapy choose to end their relationships. Although there are many benefits to therapy, there is no guarantee of positive or intended results. If during your work together with your therapist, noncompliance with treatment recommendations becomes an issue, we will make an effort to discuss this with you to determine the barriers to treatment compliance. At times, treatment noncompliance may necessitate termination of therapy service. We encourage you to discuss any concerns you have about our work together directly so that we can address it in a timely manner. Other factors that may result in termination of therapy include, but are not limited to, violence or threats toward us, unexcused missed appointments, or refusal to pay for services after a reasonable time and attempts to resolve the issue.

Deciding when therapy is complete is meant to be a mutual decision, and we will discuss how to know when therapy is nearing completion. Sometimes people begin to schedule less frequently to gradually end therapy. Others feel ready to end therapy without a phasing out period of time. We may at times seek consultation with other therapists to ensure we are helping you in the most effective manner. We will give information only to the extent necessary, and we make every effort to avoid revealing the identity of my clients. The consultant is also under a legal and ethical duty to keep the information confidential.



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Qualifications and Professional Background of Your Therapist

The specific qualifications and contact information can be found on your therapist's Professional Disclosure Statement.

Appointments

Appointments are usually scheduled for 55 minutes. Longer sessions of 65-90 minutes are scheduled in advance, as necessary and appropriate for the work needed in session.

Office hours are Monday – Friday 10am – 6pm, by appointment only.

The office is not staffed continually; if you need to drop off a payment, paperwork, or other item, please do so during sessions, or sent through the mail to: 2700 South Roan Street, Suite 435 Johnson City, TN 37601.

Clients are generally seen weekly or more/less frequently as acuity dictates, and as agreed upon before scheduling the next appointment.

You may discontinue treatment at any time; please discuss any of these decisions with your therapist, before taking action, to help with transitions.

An accumulation of 3 missed appointments within a year will result in a referral to another provider who can accommodate this kind of flexibility.

Your therapist may suggest that you consider seeking additional support and refer you to a qualified professional. It is always up to you whether you follow through or not.

Your therapist will be available to you between sessions for brief supportive contact, as needed. The office is not staffed 24/7, but your call will be returned in a timely manner, within 2 business days. In the event of an **emergency**, call the local crisis line, your primary care physician, call 911, and/or visit the local hospital emergency room immediately. After reaching one of these professionals, you agree to contact your therapist by phone immediately and leave a message about the crisis and schedule a follow up appointment.



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Confidentiality and Privacy

All of our communication is part of the clinical record, which is accessible to you upon request. A clinical chart is maintained describing our communication, your condition, treatment and progress in treatment, dates, fees and payment for sessions, and notes describing each therapy session.

Issues discussed in therapy are important and are generally legally protected as both confidential and “privileged.” No part of your identity, treatment, or story is shared outside of the therapeutic relationship. However, there are limits to this privilege of confidentiality. The limits of this confidentiality are:

- 1.) indication of abuse or neglect of a child, elderly person or a disabled person
- 2.) when your therapist believes you are in danger of harming yourself or another person, or you are unable to care for yourself
- 3.) if you report that you intend to physically injure someone, the law requires your therapist to inform that person as well as the legal authorities
- 4.) if your therapist is ordered by a court (a subpoena is not a court order) to release information as part of a legal involvement
- 5.) when your insurance company is involved, e.g. in filing a claim, insurance audits, case review or appeals, etc.
- 6.) in natural disasters whereby protected records may become exposed unintentionally
- 7.) when processing payments that are made by check/credit/debit, with the processing company and bank
- 8.) when you direct me, in writing, to disclose information to a third party

Other considerations of confidentiality:

Your therapist has an electronic record keeping system. All Electronic Health Records systems in use are HIPAA compliant.

Communication outside of the office is not considered fully confidential. We take extra precautions to keep this side of communication confidential and HIPAA compliant. When you give permission to communicate by email, voicemail, or text, you acknowledge that communication in this manner may not be fully confidential. It is your right to engage or disengage from communication in this mode at any time.

We participate in professional educational activities and supervision to improve our skills or to teach others. While engaging in this, we may discuss aspects of your process with other qualified professionals, with the understanding that no identifying information will be released without your written permission.

In case your therapist is suddenly unable to continue to provide professional services or to maintain client records due to incapacitation or death, we have designated a colleague, who is a licensed counselor, to be the professional executor of our work. The professional executor will be given access to all of the client records and may contact you directly to inform you of death or incapacity; to provide you access to your records; and/or to facilitate continued care with another qualified professional if needed.

If you are under 16 years of age, please be aware that the law may provide your parents the right to examine your



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treatment records. If you are between the ages of 16 and 18, the law may provide your parents the right to examine your treatment records if after being informed of your parents' request to examine your records, you do not object or your therapist does not find that there are compelling reasons for denying access to the records.

Notwithstanding the above, your parents are always entitled to the following information: current physical and mental condition, diagnosis, treatment needs, services provided, and services needed. Before giving them any information, your therapist will discuss the matter with you, if possible, and do their best to handle any objections you may have with what is prepared to discuss.

Financial Responsibilities

Our current JCHA group fees are as follows:

- Initial Intake Appointment \$140
- Counseling Session, 35-45min \$100
- Counseling Session, 46-60 min \$125
- Counseling Session, 61+ min \$140
- Clients with insurance: the negotiated rate with each insurance company

Our fees are reviewed annually, and an increase of \$5 per year applies to our rates every January 1st. Fees, either private pay or copay/deductibles, are payable by check, card, or cash and due at the time of service, unless other arrangements have been made with your therapist before your scheduled appointment time.

We take a variety of insurances, including BCBS, Optum, Humana, Aetna, ComPsych, Cigna, and Medicare. Check with your insurance plan to verify benefits and eligibility of coverage with your individual therapist. As a courtesy to our clients, we check benefits annually and file claims for sessions.

Insurance policies are an agreement between you and your insurance company. We are happy to maintain or seek credentialing with local insurance companies and file claims in and out of network, as a courtesy to you. We will try to help resolve any problems within our control. It is your responsibility to familiarize yourself with the process of Out-of-Network benefits, and to resolve issues beyond our control. If insurance problems persist for an unreasonable amount of time (35 days from the time of service), you will be responsible for full payment (60 days from the time of service).

When engaged in the therapy process, the use of a mental health diagnosis can be helpful in identifying issues and treatment options, and is mandatory when filing for insurance reimbursement. This becomes a permanent part of your record. Not all issues have a diagnosis, and not all diagnoses are reimbursable by insurance.

Supportive contact between sessions, for reasons other than scheduling, will be charged at a prorated of \$110/hr if the contact takes more than 10 minutes. This contact is not reimbursable by insurance.

Your medical records are available to you, at your request. Your record is also available to your insurance company at your approval. Occasionally, forms, letters of recommendation, treatment approvals, and coordination of care are required. The administrative fee for these requests is \$50 per request.



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Appointments scheduled but not kept, and not cancelled within 36 hrs of the scheduled time, will be charged \$65, due within 30 days of the scheduled appointment. You can leave a voicemail, text, or email at any time to request to reschedule your appointment. This fee will be waived in the case of personal or family emergencies, if discussed with your therapist prior to the missed appointment. Fees will not be waived for appointments missed without any prior contact.

We do not attend court cases for divorce, child support, or custody. In the event that a court appearance is mandatory, the court appearance fee is \$850 for court preparation and testimony. This fee is not reimbursable by insurance.

Social Media Policy

In order to maintain your confidentiality and our respective privacy, we do not interact with current or former clients on social networking websites. We do not accept friend or contact requests from current or former clients on any social networking sites including Twitter, Facebook, LinkedIn, etc. We will not respond to friend requests or messages through these sites.

We will not solicit testimonials, ratings or grades from clients on websites or through any means. We will not respond to testimonials, ratings or grades on websites, whether positive or negative, in order to maintain your confidentiality. Our hope is that you will bring concerns about our work together to the therapy session so we can address concerns directly.

Please do not contact us through text messages or emails regarding clinical issues. These are not a secure communication, and there is a possibility that we will not get the message in a timely manner, or that communication will be interpreted in an unclear manner. If you need to contact your therapist between sessions, please call 423.408.8041 or call them at their direct number (can be found on their Professional Disclosure Form or online at www.journeycentercounseling.com). Text messages and emails are only to be used for scheduling, changing or canceling appointments.

2700 South Roan Street, Suite 435 Johnson City, TN 37601 P: 423.408.8041
support@journeycentercounseling.com



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Professional Relationship and Ethics

You understand that we have agreed to abide by the code of ethics of the American Counseling Association and the Social Worker Code. An important aspect of ethics is to maintain appropriate right relationship between you and your therapist. Your therapist will remain professional at all times, acting respectfully and mindful of your individual autonomy and best interests.

You have a right to have your complaints heard and resolved in a timely manner. If you have a complaint about your treatment or any office policy please inform our office immediately to discuss the situation. We will take your input and criticism seriously, openly, and respond respectfully. The contact person for this is Sybil Smith, LPC 423.408.8041 or sybil@journeycentercounseling.com. We encourage you to discuss any concerns with your therapist, but are able to file a complaint with the state board organization if you determine that your therapist has violated any of the Code Of Ethics (www.counseling.org/Resources/aca-code-of-ethics.pdf). The counseling relationship is a very personal and individualized partnership. We want to know what you find helpful and what, if anything, may be getting in the way. We want you to feel free to share with us what we can do to help.

I have read and understand and agree to the information provided above. I have discussed it with my psychotherapist, and all of my questions have been answered to my satisfaction. I voluntarily consent to participate in evaluation and/or counseling treatment and I accept full financial responsibility for services. I agree to pay, in full, within 30 days of scheduled service.

Printed Name of Client	Signature of Client	Date
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Printed Name of Legal Guardian	Signature of Legal Guardian	Date
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Relationship to client: _____