consent to treat

## NAME [Patient Name]

DOB [DOB]

1. Consent to treat:

I consent to treatment of the above-named patient by Elizabeth Holmes-Coutracos, LMHC.

2. Acknowledgement of Privacy Statement:

I acknowledge that I have received a copy of the Privacy statement concerning Private Health Information which follows the HIPAA guidelines effective April 14, 2003. I agree to the terms and conditions and acknowledge that Elizabeth Holmes-Coutracos, LMHC, BCPC and I have certain rights and restrictions described in those guidelines.

3. Responsibility for payment and consent to release medical information:

In consideration for services and treatment rendered by Elizabeth Holmes-Coutracos, LMHC, BCPC. to the above named patient, I authorize, Elizabeth Holmes-Coutracos, LMHC, BCPC, to release such Information as is necessary for the completion of any claim for medical insurance, or workman's compensation.

4. Applicable to Medicare beneficiaries only:

I certify that the information given by me in applying for payment under Title XVIII of the Social Security Act is correct. I authorize any holder of medical or other information about me to release to the Social Security Administration or its intermediaries or carriers any information needed for this or a related Medicare claim. I request that payment of authorized benefits be made in my behalf.

5. I understand that I am responsible for any health insurance deductibles and co-payment.

Signature: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Please print name: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Relationship to patient: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Signature of Witness: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

DATE [date | time]