



Deep Breath Counseling, PLLC  
11225 N 28<sup>th</sup> Dr.  
Suite B220  
Phoenix, AZ 85029

# Practice Policies

## Appointments and Cancellations

Appointments will ordinarily be 45-50 minutes in duration, once per week at a time we agree on, although some sessions may be less frequent as needed. The time scheduled for your appointment is assigned to you. Clients are responsible for managing their appointments and cancelling their appointment at least 24 hours in advance, if necessary. Appointment reminders can be provided as a courtesy only.

Any cancellation within 24 hours of the appointment start time will be considered a late cancellation and the client will be charged a late cancellation fee according to the practice fee schedule. Late cancellation fees are the sole responsibility of the client and will not be billed to the client's insurance. This fee is \$50.00. Failure to pay the fee charged for a late cancellation will result in the cancellation of all future appointments for the client.

Prompt arrival to appointments is essential to ensure adequate services can be provided to our clients. Failure to arrive within the first 15 minutes of your scheduled appointment will be considered a no-show for the appointment and the client will be charged a no-show fee according to the practice fee schedule. No-show fees are the sole responsibility of the client and will not be billed to the client's insurance. This fee is \$50.00. Failure to pay the fee charged for a no-show will result in the cancellation of all future appointments for the client.

You can send a secure message to me through the client portal if you need to reschedule or cancel your appointment.

## Professional Fees

The standard fees for services provided by Deep Breath Counseling, PLLC, can be found in our Fee Schedule. The Fee Schedule is available upon request.

A \$35.00 service charge will be charged for any checks returned for any reason for special handling.

In addition to weekly appointments, it is my practice to charge fees based on a prorated basis (I will break down the hourly cost) for other professional services that you may require such as report writing, telephone conversations that last longer than 15 minutes, attendance at meetings or consultations which you have requested, or the time required to perform any other service which you may request of me. If you anticipate becoming involved in a court case, I recommend that we discuss this fully before you waive your right to confidentiality. If your case requires my participation, you will be expected to pay for the professional time required even if another party compels me to testify.

## Insurance

Deep Breath Counseling, PLLC, may be credentialed with your insurance provider. In this case, we will process claims for service with these insurance companies as a courtesy to our clients. For all other



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insurance providers, we will provide you with a copy of your receipt for payment of services, which you can submit to your insurance provider for reimbursement. Please note that not all insurance companies reimburse for out-of-network providers. If in the future, we become credentialed with your insurance provider, you will be notified and offered to continue with private pay or to bill your insurance provider.

Please keep in mind that not all issues/conditions/problems, which are dealt with in psychotherapy, are reimbursed by insurance. It is your responsibility to verify the specifics of your coverage. You should also be aware that most insurance companies require you to authorize me to provide them with a clinical diagnosis. (Diagnoses are technical terms that describe the nature of your problems and whether they are short-term or long-term problems. All diagnoses come from a book entitled the DSM-5. There is a copy in my office, and I will be glad to let you see it to learn more about your diagnosis, if applicable.) Sometimes I must 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. By signing this Agreement, you agree that I can provide requested information to your carrier if you plan to pay with insurance.

## Professional Records

I am required to keep appropriate records of the psychological services that I provide. Your records are maintained in a secure electronic health record, SimplePractice. I keep brief records noting that you were here, your reasons for seeking therapy, the goals and progress we set for treatment, your diagnosis, topics we discussed, your medical, social, and treatment history, records I receive from other providers, copies of records I send to others, and your billing records. By Arizona law, I am required to keep treatment records of clients who have terminated therapy for 6 years. For minors, I am required to keep treatment records either for at least three years after the child's eighteenth birthday or for at least six years after the last date the child received medical or health care services from that provider, whichever date occurs later.

As a client, you have the right to review or receive a summary of your records at any time, except in limited legal or emergency circumstances or when I assess that releasing such information might be harmful in any way. In such a case, I will provide the records to an appropriate and legitimate mental health professional of your choice. When more than one client is involved in treatment, such as in cases of couple and family therapy, I will release records only with signed authorizations from all the adults (or all those who legally can authorize such a release) involved in the treatment. You also have the right to request that a copy of your file be made available to any other health care provider at your written request.

## Contacting Me

I am often not immediately available by telephone. I do not answer my phone when I am with clients or otherwise unavailable. At these times, you may leave a message on my confidential voice mail (480)



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680-1240 and your call will be returned as soon as possible, but it may take a day or two for non-urgent matters. You may also reach out via the client portal through SimplePractice. I will make every attempt to inform you in advance of planned absences.

## Emergencies

As I am not readily available after hours or on weekends, if you are experiencing a genuine mental health emergency, please take one of the following actions

**Call 911**

**Call 988 – For Mental Health Crisis**

**Call the Maricopa County 24-hour crisis line at (602) 222-9444**

**Call the National Suicide Prevention Hotline at (800) 273-8255**

**Go to the nearest emergency room**

## Social Media and Telecommunication

Due to the importance of your confidentiality and the importance of minimizing dual relationships, I do not accept friend or contact requests from current or former clients on any social networking site (Facebook, LinkedIn, etc). I believe that adding clients as friends or contacts on these sites can compromise your confidentiality and our respective privacy. It may also blur the boundaries of our therapeutic relationship. If you have questions about this, please bring them up when we meet and we can talk more about it.

## Electronic Communication

My preferred form of communication is through the client portal's secure messaging option. If you prefer to communicate via email for issues regarding scheduling or cancellations, I cannot ensure the confidentiality of any form of communication through electronic media. While I may try to return messages in a timely manner, I cannot guarantee immediate response and request that you do not use these methods of communication to discuss therapeutic content and/or request assistance for emergencies.

## Termination

Ending relationships can be difficult. Therefore, it is important to have a termination process in order to achieve some closure. The appropriate length of the termination depends on the length and intensity of the treatment. I may terminate treatment after appropriate discussion with you and a termination process if I determine that the psychotherapy is not being effectively used or if you are in default on payment. I will not terminate the therapeutic relationship without first discussing and exploring the reasons and purpose of terminating. If therapy is terminated for any reason or you request another therapist, I will provide you with a list of qualified psychotherapists to treat you. You may also choose someone on your own or from another referral source.



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## PRACTICE POLICIES

**BY SIGNING BELOW, I AM AGREEING THAT I HAVE READ, UNDERSTOOD AND AGREE TO THE CONTENTS TO THE PRACTICE POLICIES OF DEEP BREATH COUNSELING, PLLC, REVISED ON NOVEMBER 27, 2022.**

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Signature

Date

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Printed Name

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Client Name (if minor)