

SAFE HAVEN COUNSELING, LLC

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CLIENT SERVICES CONTRACT

Welcome to Safe Haven Counseling! This document contains important information about our professional services and business policies. *Please read it carefully and note any questions you might have so we can discuss them.* This signed document will represent an agreement between us. *Please initial all (red blanks) in this document indicating you have read and understand that specific subject area.*

PSYCHOLOGICAL SERVICES

Psychotherapy varies depending upon the personalities and the particular issues being addressed and includes many different methods. Psychotherapy is not like seeing a medical doctor for a “cure.” Instead, it calls for a full partnership with a very active effort on your part. To get the most out of therapy you will have to work on things we talk about in session while you are at home.

Psychotherapy often involves discussing unpleasant aspects of your life as well as uncomfortable feelings and emotions. However, therapy can lead to better relationships, solutions to specific problems, and significant reductions in negative feelings. The outcome depends heavily upon your own efforts so there is no guarantee of what you will experience.

Our first few sessions will involve an evaluation of your needs. We will work together to determine your goal(s) and determine a treatment plan to follow if you decide to continue. Therapy involves a significant commitment of time, energy, and money, so you should be very careful about the therapist you select. If you have questions about your therapist’s procedures you should discuss them whenever they arise. If your doubts persist we will be happy to help you arrange a meeting with another mental health professional either here at Safe Haven Counseling or elsewhere, if necessary.

MEETINGS

A thorough initial evaluation usually takes two to four sessions. During this time you and your therapist can decide if your therapist is the best person to provide the services you need to meet your treatment goals. Once therapy begins you will usually be scheduled for one 55-minute session (one appointment hour is 55

minutes duration) per week although some sessions may be longer or more frequent if necessary. To ensure privacy, no visitor(s) not part of your therapy will be allowed in the session. **Once an appointment is scheduled you are expected to attend unless you provide notice of cancelation at least 24 hours in advance.** We will try to reschedule the appointment for a different time on the same day if possible. If a same-day reschedule is not possible we will try to reschedule for the next mutually agreeable date and time if one is available.

Effective therapy requires confidential exploration of sensitive issues with no distractions. To insure both, children who are not part of therapy and pre-approved by the therapist will not be allowed to attend sessions. Since we are not equipped or staffed to watch children, separate arrangements for childcare should be made. *If you arrive with a child who requires supervision or becomes disruptive to others, your appointment will be canceled and a no-notice cancelation fee will be assessed ([REDACTED]).*

We routinely have other clients awaiting appointments. No-notice or short-notice no-shows deny those other clients the opportunity of receiving treatment. Therefore, **all appointments canceled with less than a 24-hour notice will be assessed a fee (listed on the last page of this contract) unless we both agree that you were unable to attend due to circumstances beyond your control. You will be directly responsible for this fee since insurance will not cover missed appointments, and it must be paid before your next scheduled session ([REDACTED]).** Two (2) consecutive no-shows without contacting us or returning our contact attempts, or for reasons other than acts of God (weather, illness, etc.) may result in losing your normal time slot. Once lost, we cannot guarantee that same slot will be available when/if you resume therapy, especially mid to late afternoon appointments which are in high demand. **For liability reasons, three (3) consecutive no-shows without contacting us or returning our contact attempts will result in immediate discharge/termination of care and risk being accepted back into therapy ([REDACTED]).** While we make every effort to provide reminders a day or two prior to appointments, not receiving or not seeing a reminder does not relieve you of your responsibility to ensure you attend as scheduled ([REDACTED]). We highly recommend you put your schedule in your smart phone, if you own one, with adequate reminders.

PROFESSIONAL FEES

The current fee schedule will be provided for your approval upon your first visit and prior to commencing treatment. Costs for services of a different duration will be prorated.

Telephone conversations initiated by the client lasting longer than 10 minutes or recurring multiple times between scheduled sessions may be prorated based upon the hourly Psychotherapy for Crisis fee ([REDACTED]).

Attendance at meetings with other professionals you have authorized, preparation of records or treatment summaries, and the time spent performing any other service(s) you request are also subject to fees. If you become involved in legal proceedings requiring your therapist's participation you will be expected to pay for professional time even if called to testify on your behalf by another party. Because of the difficulty of legal involvement, the hourly consultation fee will be charged for preparation and attendance at any legal proceeding. A refundable deposit will be required before work begins. Time spent on preparation is billable even if actual attendance at the proceeding is canceled.

BILLING AND PAYMENTS

You will be expected to pay for each session at the time it is held unless we agree otherwise prior to the session. You must verify insurance coverage and terms prior to your first session or pay for your session and seek reimbursement directly from your insurer ([REDACTED]). Out-of-pocket overpayments will be refunded to you if/when paid by your insurance carrier. Likewise, you will be responsible for remitting to us any payment inadvertently sent to you that should have come to us. Payment for professional services not listed on the Fee Schedule will be agreed upon when they are requested. In circumstances of unusual financial hardship we may be willing to negotiate an alternative payment plan.

Copayments are due and payable the day of your session. For your convenience, and to streamline the process, we encourage having a credit or debit card on file with us. Once entered into our secure billing system, your card information is invisible except for the last four digits and cannot be retrieved by anyone, including the staff. **Receipts for payments are automatically generated and sent to your email address** on record. Although our system is encrypted, **we cannot guarantee your information will be encrypted on your end, so please notify us if you want to opt out of the auto-receipt service.**

If we make alternative payment arrangements and your account remains unpaid for more than 60 days and alternative arrangements for payment have not been agreed upon, we reserve the option of terminating therapy until your account is settled, and/or using legal means to secure payment ([REDACTED]). This may involve hiring a collection agency or going through small claims court. If such legal action is necessary, preparation and legal costs will be included in the claim. In most collection situations, the only information we release regarding a client's treatment is his/her name, the nature of services provided, and the amount due.

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. Health insurance will usually provide some coverage for mental health treatment. We will help fill out forms and assist you in receiving the benefits to which you are entitled; however, **you (not your insurance company) are responsible for full payment of assessed fees.** *It is very important that you find out exactly what mental health services your insurance policy covers and obtain preauthorization if required to minimize your out-of-pocket costs. ([REDACTED])*

You should carefully read the description of covered mental health services in your health insurance policy and call your plan administrator if you have questions. We will provide you with whatever information we can based upon our experience and will be happy to help you understand the information you receive from your insurance company. We will be happy to call the company on your behalf if necessary to clear up any confusion.

You should also be aware that most insurance companies require you to authorize us to provide them with a clinical diagnosis. Sometimes we must provide additional information such as treatment plans or summaries or, in very rare cases, copies of the entire record. This information becomes part of the insurance company's files and will probably be stored electronically. Though all insurance companies claim to keep such information confidential, we 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. We will provide you with copies of any reports we submit if you request them. Large files or multiple copies will be assessed a per page admin/printing fee.

Once we have the information we need 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 your sessions. It is important to remember that you always have the right to pay for services yourself to avoid the problems described above unless prohibited from doing so by your carrier's contract.

CONTACTING US

We usually have a receptionist in the office during normal business hours but there may be times when we don't, and providers do not answer the phone when with clients. When we are unavailable our telephone is answered by monitored voicemail. We will make every reasonable effort to return your call within one business day. Please bear in mind we cannot control clients' full or inactive voicemail boxes and time limits preclude numerous calls in those situations. If you are difficult to reach, please inform us of the best time(s)

to contact you. In emergencies you may contact us at our after-hours emergency cell number. If you are unable to reach us directly and feel that you cannot wait for a return call, contact your family physician, 911, or the nearest emergency room and ask for the psychologist/ psychiatrist on call.

When communicating electronically, bear in mind **the reminder text service is only for confirmation or cancelation of appointments. It is NOT an emergency contact method**, and the staff does not see responses unless logged into the secure system. If it must be used as a communication method, limit its use to a single sentence and bear in mind it will not be seen until the next business day. If emailing, the use of **Gmail cannot guarantee confidentiality, so limit content to subjects that are not personal or confidential in nature.** **Each client has the option of a secure, encrypted Client Portal to use for confidential information and accessing other information pertaining to their account information. If you would like to set up a Client Portal please let the receptionist know.** To minimize the chances of misinterpretation, all electronic communication from us, whether by text or email, will be as concise as possible.

PROFESSIONAL RECORDS

The laws and standards for mental health providers in Alaska require that we keep treatment records. You are entitled to receive a copy of the records unless your therapist believes seeing them would be emotionally damaging to you, in which case we will be happy to send them to a mental health professional of your choice designated by you in writing. You should be aware that this will be treated in the same manner as any other professional (clinical) service and you will be billed accordingly. Because these are professional records, they can be misinterpreted and/or upsetting to untrained readers. We recommend that you review them in your therapist's presence so that you can discuss the contents. We are sometimes willing to conduct a review meeting without charge; however, you will be charged an appropriate fee for any time spent preparing written information requests or unwritten requests requiring more than a reasonable period of preparation time.

MINORS

If you are under eighteen years of age, please be aware the law may provide your parent(s)/legal guardian(s) the right to examine your treatment records. However, out of respect for you and to encourage the best treatment possible, we will encourage your parents to refrain from accessing your records and, unless specifically asked otherwise, we will only provide them with general information about our work together. **The primary exception to this understanding is in the interest of your safety.** If we feel there is a reasonable risk that you may seriously harm yourself or someone else we will notify them. Except in cases where you or someone else may be in danger and time is of the essence, we will discuss any information with you

before sharing it and we will discuss the matter with you, if possible, and do our best to handle any objections you may have with what we are prepared to discuss. *Missed sessions are not confidential and will also be reported to your parents.*

CONFIDENTIALITY

In general, the privacy of all communications between a client and their mental health provider is protected by law and we can only release information to others about our work with you with your written permission. However, there are a few exceptions:

- In most legal proceedings you have the right to prevent us from providing any information about your treatment. In some proceedings involving child custody and those in which your emotional condition is an important issue, judges may order your therapist's testimony if they determine that the issues demand it. In cases of legal claims against providers, the law allows disclosure of any information needed for a proper defense, including otherwise-protected information.
- In some situations we are legally obligated to take action to protect others from harm even if we have to reveal some information about a client's treatment. For example, if your therapist believes a child, elderly person, or disabled person is being abused, we must file a report with the appropriate state agency.
- If we believe a client is threatening serious bodily harm to another, we are required to take protective actions (Duty to Warn). These actions may include notifying the potential victim, contacting the police, or seeking hospitalization for the client. If a client threatens to harm himself/herself, we are obligated to seek psychiatric treatment/hospitalization for him/her. We may also contact family members or others who can legally help provide protection. These situations rarely occur; however, if one does occur we will make every effort to fully discuss it with you, if possible, before taking any action.
- We may occasionally find it helpful to consult another professional about a case. During a consultation we make every effort to avoid revealing personally identifiable information about clients. The consultant is also legally bound to keep the information confidential. Unless you object, we may not tell you about these consultations unless we feel it is important to our work together.
- Referrals by some healthcare payors, including Tricare and the Veterans Administration, require a follow-up after the client's initial appointment to confirm attendance, affirm they are not a danger to themselves or others, and provide an initial (provisional) diagnosis. Clients are informed when this situation applies and what information is being shared.

While this written summary of exceptions to confidentiality should prove helpful in informing you about potential problems, it is important to address any questions or concerns you may have. Your therapist will be happy to discuss these issues with you if you need specific advice, but formal legal advice may be needed because laws governing confidentiality can be quite complex and we are not attorneys.

In the interest of professional neutrality in the therapeutic relationship, particularly when working with couples or multiple family members, you agree not to subpoena or depose your therapist or any of your therapist's records in any civil legal proceeding.

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

Printed name

Signature

Date