

Lori Ann Roland, LPC, LCADC
Adult & Adolescent Psychotherapy
4 Murray Grove Lane
Lanoka Harbor, NJ
Phone: (732) 539.7642 Fax: 732.364.0171

THERAPIST/CLIENT/ CONTRACT

FOR YOUR INFORMATION

As a consumer of therapeutic services, there are several questions which often arise, and information you will need to know. Since it is impossible to cover all possible questions, I encourage you to bring up any questions or concerns with me.

CONFIDENTIALITY

All information that is discussed in our sessions is kept confidential. That means I cannot reveal anything we discuss without your written permission. Release of information forms will be provided to you for that purpose, in the event that you wish me to release specific information regarding your treatment. Confidentiality does not extend to statements involving suicide, homicide or child abuse.

SERVICES

I provide individual, marital, couples and family therapy sessions. Typically, sessions last for approximately 45-60 minutes. In addition to traditional psychotherapy, I am also a New Jersey State Licensed Clinical Alcohol and Drug Counselor and provide assessments, addictions counseling, co-dependency and ACOA counseling. I have been trained in family therapy as well.

You are encouraged to ask questions regarding your diagnosis, treatment and treatment plan. Together we will discuss a treatment plan which will best meet your treatment needs and which will be cost effective. If for some reason you are dissatisfied with your case, I would also like you to discuss this with me so we can come to an agreement regarding what changes need to be made. Psychotherapy is different from traditional medical treatment: patients are an active part in all phases of treatment, not simply a passive recipient of services.

COMPLAINT/GRIEVANCE

Alcohol and drug counselors are licensed by the Board of Marriage and Family Therapy Examiners, Alcohol and Drug Counselor Committee, an agency of the Division of Consumer Affairs. Any member of the consuming public having a complaint concerning the manner in which the alcohol and drug counseling practice is conducted or services are provided should notify the Alcohol and Drug Counselors Committee, PO Box 45040, 124 Halsey Street, Newark, New Jersey 07101, www.state.nj.us/lps/ca/medical/alcdrug.htm or The New Jersey Division of

Consumer Affairs, Post Office Box 45027, 124 Halsey Street, Newark, New Jersey 07101,
www.state.nj.us/ps/ca/comp.htm.

FEES

Individual, couples, marital and family therapy sessions lasting 60 minutes are \$165.00–\$185.00 per session. Fees for substance abuse evaluations are discussed on an as needed basis with the provider. Additional written report fees are discussed on an as needed basis. Evaluations/Assessments for legal services begin at \$2000. and are subject to increases contingent upon billable hours. You will be provided with a receipt at the end of the session which contains my license and Tax ID Number, and a diagnosis and procedural code. I encourage you to submit these receipts to your insurance carrier for reimbursement.

CANCELLATION OF APPOINTMENTS

In the event of an emergency, it may be necessary for you to cancel your session. Since the time we have scheduled is for you, I request that you provide me with at least 48 hours advance notice of cancellation. You will be billed the full session fee for appointments that are not canceled in advance.

CONSENT TO RECEIVE ELECTRONIC COMMUNICATION

My signature indicates that I give consent to receive electronic communication from Lorianroland.com for informational purposes. I retain the right to unsubscribe at any time.

I certify that I have read the information sheet and that I understand its contents.

Date

Signature of Patient (or Parent/Guardian)