

Finding Freedom Now, LLC

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CLIENT INFORMATION SHEET

Welcome to Finding Freedom Now. I look forward to working with you. The following will provide general information regarding my professional services and business policies. Please read this carefully, and we can discuss any questions you have when we meet during our first session.

About Me: I am clinically trained and licensed in the state of Georgia as a clinical social worker. I believe that the relationship you have with your counselor is the best predictor of success. I am a warm, caring and compassionate professional who truly cares about those I serve. I am passionate about helping others experience healing and freedom through Christ and dedicate my work to using His principles and biblical wisdom. If you are not interested in Christian or biblically-based counseling, I will be happy to refer you to a secular counselor.

Goals: I believe that discussing your goals for the counseling process is helpful so that we can refer back to them as a way to measure your progress. Goals can be short term or long term, depending upon your particular circumstances. A long-term goal may be something such as improving the quality of your marriage or relationships, while a short-term goal may be something such as decreasing symptoms of anxiety and/or depression. I may make suggestions and often use material to help you achieve your goals, but you are the one to decide what they are.

Appointments: Appointments will generally be 50minutes in length ,once per week ,although some sessions may be more or less frequent as needed. The time scheduled for your appointment is assigned to you and you alone. Except in cases of emergency, please

give 24-hour notice if you are unable to keep any appointment; otherwise, the full charge will be made for the time reserved for you. Repeated missed appointments without 24-hour notice may be the basis for the termination of services. In addition, you are responsible for coming to your session on time; if you are late, your appointment will still end on time.

Insurance: I am currently in network with BCBS and Tri Care. I do reserve a percentage of my practice to clients with insurance and will accept a self pay agreement when my insurance quota is met. Aside from when my client load is full, I am always able to accept self pay clients.

Professional Fees: You are responsible for paying at the time of your session unless prior arrangements have been made. Payment may be made by cash, check or credit card. I use Ivy Pay for payments and you can trust that your information is stored securely.

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.

Fee Schedule:

90837 - Psychotherapy - Initial assessment, 60 minute

Initial session: \$120, additional sessions \$105.

Confidentiality:

All communications between client and therapist will be held in confidence and will not be revealed unless authorized by you and/or required by law, such as situations of child abuse or threats of physical harm to self or others. Failure to pay may necessitate forwarding information related to your account to a collection agency. If you wish to have information released, you will be required to sign a consent form. I may consult with other professional counselors in order to give you the best service. If I do consult with another counselor, no identifying information, such as your name, will be released. If I receive a court

order or subpoena, I may be required to release some information. In such a case, I will consult with other professionals and limit the release to only to what is necessary by law.

Children: I cannot accept responsibility for the supervision of unattended children in the waiting room. If you bring along a child that will be waiting, please bring another adult along to supervise him/her while we meet.

I have read and agree to Finding Freedom Now's policies as listed above.

Name/Date
