



**1440 Campbell Lane, Suite 600
Bowling Green, KY 42104
P:270-715-1178 F:207-715-1189**

Practice and Policies Notice

Professional Fees

Our Psychotherapy sessions are typically 60-minute sessions. The first session fee is \$150.00 where the client is evaluated and diagnosed. All following sessions in person or over the phone is \$125.00. Consultation, and/or supervision is at the discretion of the provider. Medical Massage therapy and/or somatic body work is \$125.00 per hour. Swedish massage is \$75.00.

Insurance Reimbursement

Journey Through Counseling LLC, will submit insurance claims to pay for services rendered. It is expected that the insurance will pay as the client expects it to. Usually the health insurance will provide substantial coverage for mental health treatment. The office manager can assist you in obtaining authorization for receiving your entitled benefits. It is your responsibility for full payment of fees, therefore, it is important to learn about your insurance's coverage for mental health services. You also need to be aware that health insurance companies usually ask to know your diagnosis, treatment plan, and progress notes. In all cases, Journey Through Counseling LLC will abide by the HIPAA guidelines and your provider will release only the minimum information necessary for the purpose requested. With your signature on the **Service Intake Information Sheet**, you agree that you provided my release the requested information to your insurance company. You also have the right to pay for services yourself to avoid having information released to a third party (unless prohibited by contract).

Billing and Payments

Payment of fees, copays, or deductibles are due at time of service. In the case of unusual financial hardships, your provided may negotiate a payment installment plan. **Overdue accounts will be charged a monthly rebilling fee of \$5.00.** Accounts overdue more than 90 days will be sent to a collection agency, who may secure legal means to secure payment. If your account is not paid when due, and Journey Through Counseling, LLC retains an attorney or collection agency for collections, by signing the **Service Intake Information Sheet**, you agree to pay all costs of collection including court costs, responsible interest, reasonable attorney's fees, and responsible collection agency fees. In most collection situations, the only information release is what is on the **Service Intake Information Sheet**, the nature of the services provided, and the amount due.

Consent to Use and Disclose your Health Information

When we evaluate, diagnose, treat, or refer you or the person you represent, we will be collecting what the law calls Protected Health Information (PHI) about you. We need this information to decide what treatment is best for you, and to provide that treatment. We will follow all regulations in accordance to the Health Insurance Portability and Accountability Act (HIPAA). HIPAA is a federal law that provides privacy protection and clients rights with regards to the use and disclosure of you PHI. We may share your PHI with others who provide treatment to you, those who need it to arrange payment for your treatment, or for administrative purposes. In other situations, we can release information about your treatment only if you sign a written authorization form. Please read this Practice and Policies Notice carefully. If you have any questions we will try to answer them. By signing the **Service Intake Information Sheet**, you are

affirming that you have read this notice and you are consenting to let us use your information, and to send it to others as needed for your treatment.

In the future we may change how we use and share your information, and our Practice and Policies may change. If we change it, you can get a copy by requesting it from us. If you have a concern about the use of your information, you have the right to ask us to restrict how we use it, or share your information for treatment, payment or administrative purpose. You will need to tell us what you would like in writing. After you have signed the consent, you have the right to revoke it in writing and we will comply with your wishes, although keep in mind that this information may have already been used and we cannot change that.

Client's Rights

No client shall be unlawfully discriminated against in determining eligibility. All client(s) will be afforded written informed consent. If the client is a juvenile, both parent, and juvenile will be informed, and will be asked to sign the **Service Intake Information Sheet**. The client(s) share in creating their treatment plans, and have the right to a copy. The client has the right to request and review his/her record and to receive one free copy. All clients will be treated with dignity and respect and will be informed of minimum standards of behavior that ensures that the dignity and respect of others is preserved. These minimum standards of behavior include but are not limited to:

- *Use of alcohol/drugs within 24 hours of participation in a scheduled activity will result in suspension for that particular activity, the scheduling of an individual session at the client's expense (hourly rate as posted) for the purpose of reassessment and possible modification of the treatment plan before the next scheduled session.
- *Any act of violence will result in possible police intervention that may include arrest.
- *No cursing unless during session as part of the process. No aggressive or disparaging tone unless during session and part of the process.
- *No weapons--including knives over 3 inches, an open blade of any kind, and/or guns of any kind are permitted on the premises. Note: We will not check a weapon and clients will not be permitted to attend the activity for which they are scheduled unless they divest of the weapon by the time of the activity.

Informed Consent & Limits of Confidentiality

Contents of all therapy sessions are considered to be confidential. Both verbal information and written records about a client cannot be shared with another party without the written consent of the client or the client's legal guardian. Noted exceptions are as follows:

Duty to Warn and Protect

When a client discloses intentions or a plan to harm another person, the mental health professional is required to warn the intended victim and report this information to legal authorities. In cases in which the client discloses or implies a plan for suicide, the health care professional is required to notify legal authorities and make reasonable attempts to notify the family of the client.

Abuse and/or neglect of an individual

If a client discloses that he or she has or is abusing or neglecting another individual (child, elderly, disabled person or adult), or had or is being abused or neglected by an individual, or discloses spousal domestic violence, Kentucky law requires mental health professional to report such behaviors to the appropriate state and/or local authorities.

Court order to testify

Mental Health care professionals are required by law to respond to any and all court orders. The client's confidentiality is no longer protected if a counselor/therapist is subpoenaed to testify in a court of law. However, the counselor/therapist will do everything possible to protect your

confidentiality while still complying with the order. Furthermore, upon any charges filed against a counselor/therapist your confidentiality is no longer protected.

Prenatal Exposure to Controlled Substances

Mental Health care professionals are required to report admitted prenatal exposure to controlled substances that are potentially harmful.

Minors/Guardianship

As clients, minor children and adolescent also deserve the right to privacy and confidentiality. However, it is understood that as a parent you are responsible for and concerned about your child. Therefore, a verbal summary of your child's session will be provided to you upon request. This summary may include and is not limited to play themes in the case of play therapy, general concerns or issues of the child and of the counselor, and progress toward counseling goals. As part of our treatment agreement you agree not to have me called as a witness for any court appearance.

Insurance Providers (when applicable)

Insurance companies and other third-party payers are given information that they request regarding services to clients. All of our communication becomes part of the clinical record. Records are the property of Journey Through Counseling, LLC. Adult and minor records will be disposed of in accordance with the agency's policies.

You as the client direct me to tell someone about you

By signing a Release of Information you allow your provider permission to give information about you to a specific individual. Verbal consent of release of information is only accepted when all parties are present and is limited to only that one-time event. Without a signed release of information, no future communication with a third party is permitted.

Email

If you choose to use email it is with an understanding that the mental health professional, and/or the practice cannot fully protect your information. All emails are sent out with a disclaimer however, this does not protect from hackers, or hosting scanning. Additionally, any email communication could be subpoenaed and used in court.

Text Messaging

If you choose to use text messaging it is with an understanding that the mental health professional, and/or the practice cannot fully protect your information. Never is any clients contact information saved on the mental health professional phone. However, any and all information communicated through text is at risk. Additionally, phone records including text message could be subpoenaed and used in a court of law.

Facebook

A counselor/therapist will not accept any personal friend requests from clients on their personal Facebook page. This is to protect the working relationship and your confidentiality. However, you are welcome to like and follow the office's page.

Public

If a counselor/therapist sees you in public, they will protect your confidentiality by acknowledging you only if you approach them first. They will not introduce you to anyone they are with.