

Blumberg Family Therapy Group Inc
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INFORMED CONSENT

This document contains important information about our professional services and business policies. Please read it carefully and jot down any questions you might have so that we can discuss them in our next meeting. When you sign this document, it will represent an agreement between us.

PSYCHOTHERAPY SERVICES

Psychotherapy is not easily described in general statements. It varies depending on the personalities of the psychologist and client, and the particular issues you bring to treatment. There are many different methods that your therapist may use to deal with the problems that you hope to address. These methods include cognitive behavioral, psycho-dynamic, mindfulness-based psychotherapy, play therapy with children, structural, solution-focused, among others.

Psychotherapy can have benefits and risks. Approaching feelings and thoughts that a person has tried not to think about may be painful. Making changes in your thinking or behaviors can be scary and sometimes disruptive. On the other hand, clients find that their relationship with their therapist and the work done in psychotherapy results in benefits such as improved relationships, solutions to specific problems and significant reductions in feelings of distress. It is important to remember that there are no guarantees of what you will experience. There are risks involved with changing. Most people who take these risks in therapy found that it was helpful and that they have benefited.

The first session or two will involve an evaluation of your needs. By the end of the evaluation, your clinician will be able to offer you some first impressions of what the work will include and a treatment plan to follow, if you decide to continue with therapy. You should evaluate this information along with your own opinions of whether you feel comfortable working with your clinician. Therapy involves a significant commitment of time, money and energy, so you should be very selective about the therapist you choose to see. If you have questions about your clinician's procedures, you should discuss them whenever they arise. If your doubts persist, your clinician will be happy to refer you to another mental health professional for a second opinion.

MEETINGS

Your clinician normally conducts an evaluation that will last several sessions. During this time, your clinician can decide if she is the best person to provide the services you need in order to meet your treatment goals. If psychotherapy is begun, she usually schedules one 50-minute session per week (one appointment hour of 50 minutes duration) at a time that is agreed upon, although some sessions may be longer or more frequent. Once an appointment hour is scheduled, you will be expected to pay for it (or your insurance carrier) unless you provide at least 24 hours advance notice of cancellation. If you cancel or reschedule in less than 24 hours, you will be billed for the session at the rate you normally pay or if you use insurance, at the contracted rate for that carrier. If it is possible, your clinician will make every effort to reschedule your appointment.

PROFESSIONAL FEES

The usual and customary fee for service is \$160.00 per 45 to 50 minute session. Sessions longer than 50 minutes are charged for the additional time pro rate. If you have a 75 minute session, your fee will be an additional \$80.00. Therapist reserves the right to periodically adjust this fee giving you a 30 day notice. In addition to your weekly appointments, there will be a charge for other professional services you may need. Other services include report writing, telephone conversations lasting longer than 10 minutes, attendance at meetings with other professionals that you have authorized, preparation of records or treatment summaries and the time spent performing any other service that you request. This will all be pro rated based on the \$160.00 fee. If you become involved in legal proceedings that require your clinician's participation, you will be expected to pay for the professional time even if they are called to testify by another party.

COURT ORDERED THERAPY

The usual and customary fee for service is \$200.00 per 45 to 50 minute session. Sessions longer than 50 minutes are charged for the additional time pro rata. Court ordered cases may include but are not limited to conjoint therapy between parent and child, individual parent, any individual who is court mandated to seek therapy for DUI'S, anger management, DV, divorce cases, reunification therapy and co-parenting sessions.

An advance payment of \$500.00, payable by cash, check or credit card is required for all court ordered therapy cases. This money will be charged against telephone calls with therapists, courts, and family members necessary and pertinent to each case and any remaining balance will be returned to the Patient upon completion of services. Additional advance payments may be required when the initial payment is exhausted or reaches a predetermined level. The Patient agrees to provide payment before further communication is continued with professionals in this case.

We as therapists do not go to court, however if a court appearance is required the fee, which is inclusive of transportation and time, is billed at \$275.00 per hour.

BILLING AND PAYMENT

You will be expected to pay for each session at the time it is held, unless it is agreed otherwise or unless you have insurance coverage which requires another arrangement. Payment schedules for other professional services will be agreed to when they are requested. In circumstances of financial hardship, your clinician may negotiate a fee adjustment or payment installment plan.

INSURANCE REIMBURSEMENT

In order to set realistic treatment goals and priorities, it is important to evaluate what resources you have available to pay for your treatment. If you have a health insurance policy, it will usually provide some coverage for mental health treatment. Your clinician will fill out forms and provide you with whatever assistance she can in helping you receive the benefits for which you are entitled; however, you (not your insurance carrier) are responsible for full payment of the fees.

It is very important that you find out exactly what mental health services your insurance policy covers.

You should carefully read the section in your insurance coverage booklet that describes mental health services. It is not uncommon that major insurance carriers contract separately for mental health services with a third party carrier, and your clinician must be a provider under that carrier in order to have your psychological services covered. If you have questions about the coverage, call your plan administrator or the number on the back of your insurance card. Of course, your clinician will provide you with whatever information she can based on her experience and will be happy to help you in understanding the information you receive from your insurance company. If it is necessary to clear confusion, she will be willing to call the insurance on your behalf.

Once your clinician has all the information about your insurance coverage, you and your clinician will discuss what you 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 treatment sessions. It is important to remember that you always have the right to pay for your clinician's services yourself to avoid the problems described (unless prohibited by contract).

CONTACTING YOUR CLINICIAN

Your clinician is not always immediately available by phone. When they are unavailable, the office telephone is answered by voice mail that is monitored frequently. Your clinician will make every effort to return your call within a day, with the exception of weekends and holidays. If you are difficult to reach, please inform your clinician of some times when you will be available. If your particular clinician provides you with an emergency contact number, you may contact them this way as well. If you are unable to reach your clinician and feel that you cannot wait for her to return your call, contact your family physician or the nearest emergency room and ask for the psychologist or psychiatrist on call. Your clinician may be away from the office at times for professional meetings, occasional vacations and professional conferences. Clients are always to be informed well in advance of these planned absences and will have a therapist offered as back-up who can provide interim counseling and support until your clinician returns.

PROFESSIONAL RECORDS

The laws and standards of the profession require that this practice keep treatment records. You are entitled to receive a copy of your records, or your clinician can prepare a summary for you instead. Because these are professional records, they can be misinterpreted and/or upsetting to untrained readers. If you wish to see your records, it is recommended that you review them with your clinician so that the contents can be discussed. Clients will be charged an appropriate fee for her professional time spent in responding to information/copy requests.

MINORS

If you are under eighteen years of age, please be aware that the law may provide your parents the right to examine your treatment records. It is our policy in this practice to request an agreement from parents that they agree to give up access to your records. If they agree, your clinician will provide them with only general information about your work together, unless they feel that there is a high risk that you will seriously harm yourself or another person. In this case, your clinician will notify them of her concern. They will also provide them with a summary of your treatment when it is complete if necessary. Before giving parents/guardians any information, your clinician will discuss the matter with you, and, if possible, do their best to handle any objections you may have with what they are prepared to discuss.

CONFIDENTIALITY

In general, the privacy of all communications between a client and a psychotherapist are protected by law, and your clinician can only release information about your treatment to others with your written permission. There are a few exceptions.

In most legal proceedings, you have the right to prevent your clinician from providing any information about your treatment. In some proceedings involving child custody and those in

which your emotional condition is an important issue, a judge may order their testimony if he/she determines that the issues demand it.

There are some situations in which your clinician is legally obligated to take action to protect others from harm, even if they have to reveal some information about the client's treatment. For example, if your clinician believes that a child or an elderly/disabled person is being abused, she is required to file a report with the appropriate County agency.

If your clinician believes that a client is threatening serious bodily harm to another, or death to another, she/he may be required to take action to protect others. These actions may include notifying the potential victim, contacting the police or seeking hospitalization for the client. If the client threatens to harm him/herself, she/he may be obligated to seek hospitalization for him/her or to contact family members or others who can help provide protection and safety for the client.

These situations have occurred rarely in this practice. If a similar situation occurs, your clinician will make every effort to discuss it with you fully before any action is taken.

There are times when your clinician consult with other professional colleagues to gain greater insight and receive feedback on her work. This is an essential part of professional practice that most psychologists practice in order to provide the highest quality of treatment. If your clinician consults on their work, they will not use your name or any other identifying information. If you feel that your clinician is in need of getting better information about a topic of concern for you, please let them know: we are always open to your suggestions and concerns and encourages collaboration.

All other disclosures of information, even to say that you are receiving treatment, must be authorized by you and all other information remains protected and confidential.

While this written summary of exceptions to confidentiality should prove helpful in informing you about potential problems, it is important that you discuss with your clinician any questions or concerns that you have at the next meeting. They will be happy to discuss these issues with you if you need specific advice, but formal legal advice may be needed because the laws governing confidentiality are quite complex, and your clinician is not an attorney. If you request, they will provide you with relevant portions or summaries of the State laws regarding these issues.

OTHER RIGHTS

You have the right to ask questions about anything that happens in therapy. Your clinician is always willing to discuss how and why she/he has decided to do what she/he is doing, and to consider alternatives that may work better. You can request that your clinician try something else you think may be more helpful. You can request information about your clinician's training in working with your particular problem, and can always choose to see another therapist if you choose. You are free to end therapy at any time and can decline services altogether if desired.

Responsibilities of a Therapy Client

1. Clients are responsible for coming to their appointment on time, as scheduled. If clients are late, the session will end on time and not run into the next client's appointment time.
2. Clients who are using insurance are responsible for paying their copayment at each appointment unless other arrangements are made with their clinician.
3. The client is responsible for informing their clinician of any change in insurance coverage, address and phone number and emergency contacts.

CONSENT TO PSYCHOTHERAPY

I have read this statement, had sufficient time to be sure that I considered it carefully, and understand it. I consent to the use of a diagnosis in billing (if applicable), and to release that information and other information necessary to complete the billing process (if applicable). I understand my rights and responsibilities as a therapy client, and my clinician's responsibility to me. I agree to receiving assessment and/or treatment with my clinician as described. I know that I can end therapy at any time, and that I can refuse any requests or suggestions made by my clinician. I agree to abide by the terms of this contract for the duration of our professional relationship.

Signed: (Client or Parent/Guardian)

_____ Date _____

Signed: (Client or Parent/Guardian)

_____ Date _____

Child(ren) name (if children are being treated):

Your Clinician:
