



Interplay Counseling Services
1150 Fifth Street, Suite 261
Coralville, IA 52241

OUTPATIENT CONTRACT FOR SERVICES FOR ADULTS

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. When you sign the **Informed Consent to Outpatient Treatment for Adults**, it will represent an agreement between you and your therapist. Counseling and therapy services involve a commitment of time, money, and energy, so you should be careful about the practitioner you select. If you have questions about our procedures, we should discuss them at the time they arise. If your doubts persist, we will be happy to provide some referrals in order to help you to find another mental health professional to serve you.

PSYCHOLOGICAL THERAPY SERVICES

Therapy is a partnership between you and your therapist to find new ways of handling problems of daily living. There are many different methods that may be used to deal with the problems that you hope to address. Psychotherapy is unlike the typical visit to your medical doctor. It calls for a very active effort on your part. To obtain the most successful outcome, you will need to work on the things we talk about both during our sessions and at home. It is also important for you to attend the appointments and keep a regular schedule to maintain momentum toward a positive outcome.

Psychotherapy can have benefits and risks. Since therapy often involves addressing difficulties in life, you may experience uncomfortable feelings like sadness, frustration, and worry. However, therapy has also been shown to have benefits for people who go through it. Therapy often leads to better relationships, solutions to specific problems, and significant reductions in feelings of distress. There are no guarantees of what you will experience. However, we will work with you as best we can to provide a positive therapy experience.

THERAPY SESSIONS

During the initial sessions, we will typically complete an intake interview and gather information about your symptoms and background. If you decide to pursue a course of psychotherapy, we will usually schedule a series of 45-minute sessions (one appointment = 45-minutes duration) for you, usually on a weekly or bi-weekly basis. Some sessions may be longer or more frequent. It will be important for you to come on time so you receive the benefit of a full-length session. If you are late for an appointment, it is likely that your session will be completed at the time it was originally scheduled to end.

MISSED APPOINTMENTS AND SCHEDULING ISSUES

Once an appointment is scheduled, you may cancel for any reason. Since we can accept only a limited number of clients, our time is precious. A late cancellation or missed appointment is a loss to us and to those waiting for appointments. If you need to cancel an appointment we ask that you call **24 hours** in advance of the appointment to cancel and reschedule. **If you miss an appointment you will be charged a no-show/late cancellation fee. This fee ranges from \$75.00 up to the full fee for the scheduled session.** If this is a continuing pattern, your care may be discontinued and referrals made for follow up. We do understand circumstances may arise that may be beyond your control, and we will consider each situation on a case by

case basis. Please understand that your insurance benefits do not apply for missed sessions and you will be responsible the late fee as an out of pocket expense.

It is important for you to understand that this psychotherapy practice is busy. As a result, you may not always have the ability to reschedule easily for the same week in which you cancelled or missed an appointment. You may not always be able to secure times for appointments after work. However, we will do the best that we can to work with you on scheduling concerns.

We do NOT provide reminder calls or emails consistently at this time. Please don't wait for a reminder call or email, as you are likely to miss your appointment.

PROFESSIONAL FEES

Fees vary according to the service provided. Initial diagnostic intake sessions are billed at \$175.00, interactive diagnostic intake at \$185.00, 45-minute individual sessions at \$125.00, 45-minute interactive individual sessions at \$135, 45-minute family sessions at \$135.00, 75 minute individual sessions at \$175.00 and interactive individual sessions at \$185.00. We offer a sliding fee scale if you wish to pay privately and not use your health insurance benefit plan. We may charge for other professional services you may need (e.g telephone or email consultations, attendance at meetings with other professionals you have authorized, report/letter writing). Any legal proceedings will need to be discussed prior to our participation.

BILLING AND PAYMENTS

You are responsible for payment or co-payment of each session at the time it is held, unless we agree otherwise, or unless you have insurance coverage that requires another arrangement.

DELINQUENT ACCOUNTS

Balances carried for more than 90 days will incur a late payment fee each billing cycle, which will amount to up to 5 percent of the total owed. If a satisfactory payment agreement has not been agreed upon, we have the option to use legal means to secure payment, including hiring a collection agency or going through small claims court. If such legal action is necessary, the cost of taking such action will be included in the claim.

INSURANCE REIMBURSEMENT

In order for us to set realistic treatment goals and priorities, it is important for you 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. We will provide you with assistance to help you receive the benefits to which you are entitled; however you (not your insurance company) are responsible for payment of our fees. It is very important that you find out exactly what mental health services your insurance policy covers prior to your first appointment. We are contracted with many insurance plans to provide services, and in so doing have agreed to accept the reimbursement they provide, along with any co-payment and deductible amounts that are required to be paid by you.

You should carefully read the section in your insurance coverage literature that describes mental health services. We request that you call your plan administrator prior to your first appointment to verify your benefits and receive your authorization (if needed) for mental health services. If your policy limits the number of mental health visits within a given year, you are responsible for keeping track of these visits, as often other providers (i.e. psychiatry visits) are included in this number of sessions allowed. We will provide you with whatever information we can based on experience and will be happy to help you in understanding the information you receive from your insurance company.

You should also be aware that insurance companies require you to authorize us to provide them with a clinical diagnosis. Sometimes we have to provide additional clinical information such as treatment plans or summaries, or copies of the entire record (in rare cases). This information will become part of the insurance company files and will probably be stored in a computer. 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. It is important to remember that you always have the right to pay for our services yourself to avoid the problems described above.

CONTACTING US

Due to the limits of the practice, your therapist is not immediately available by telephone. When we are unavailable, our telephones are answered by voice mail that we monitor frequently. We will make every effort to return your call during the same week you make it, usually within 24 hours, with the exception of weekends, holidays or vacations. If you leave a voice mail on Friday, it is likely we will not be available to reach you until the following work week. If you are difficult to reach, please inform us of some times when you will be available. If you are unable to reach us and feel that you can't wait for us to return your call, or if you are in a psychiatric crisis, or in case of emergency, contact your family physician or the nearest emergency room for assistance. Please understand that we do not offer phone or email therapy between sessions. It is important that your therapeutic work is done in your therapy sessions, in person. If you feel you need to attend sessions more often, please let us know so we can discuss that option.

PROFESSIONAL RECORDS

The laws and standards of our profession require that we keep treatment records. Legally, you are entitled to receive a copy of your records, or a brief summary may be prepared for you instead. Session records are very brief and contain general information up to and including only that content required by your insurance company standards. This limited information is maintained in this way in order to ensure your privacy and the privacy of those you may discuss within your sessions.

COURT TESTIMONY

Unless pre-arranged prior to initiating services, **we will not provide therapy notes or testimony to the court as a part of litigation without a court order.** If we are required to provide testimony or records to the court under court order, we reserve the right to terminate services.

CONFIDENTIALITY

In general, the privacy of all communications between a client and a provider of mental health services is protected by law, and we can only release information about our work to others with your written permission. Typically, we will ask you to sign a release of information form to share information with your physician for care coordination.

There are a few exceptions to confidentiality, and they include the examples listed below. These situations have rarely occurred in our practice. If a similar situation occurs, we will make every effort to fully discuss it with you before taking any action.

1. If the client threatens to harm himself or herself, we may be obligated to seek hospitalization for him or her or to contact family members or others who can provide protection or facilitate admission to the hospital.
2. If we learn of suspected or alleged abuse or neglect of a child, elderly person, or disabled person, we must file a report with the appropriate state agency.

3. If we believe that a patient is threatening serious bodily harm to another, we are required to take protective action. These actions may include notifying the potential victim, contacting the police, or seeking hospitalization for the client.
4. We may occasionally find it helpful to consult another professional about a case. During a consultation, we make every effort to avoid revealing the identity of my client. The consultant is also legally bound to keep the information confidential. If you don't object, we will not tell you about these consultations unless we feel that it is important to our work together.

While this written summary of exceptions to confidentiality should prove helpful in informing you about potential problems, it is important that we discuss any questions or concerns you may have.

GROUNDINGS FOR TERMINATION

Services are provided at the discretion of the therapist. We reserve the right to terminate therapy services if you behave inappropriately towards your therapist or anyone in our employ, if we are court-ordered to testify (thus causing a dual-role relationship), if there is consistent failure to attend scheduled appointments, or if there is a failure to complete payment for services.

WEATHER POLICY

In cases of severe weather, we will leave an outgoing message on voicemail indicating whether the office is closing or will be open for a portion of the day. In general, we follow the severe weather cancellation policy of the Iowa City Community School District. However, this is not always the case so be sure to check our voicemail if severe weather threatens. If we close the office, we will make every effort to contact you, so please make sure that we have up to date contact information for you. We will often reschedule to other available slots within the same week in this case, if at all possible.

E-MAIL CONTACT

At times, we may use email to communicate with you regarding appointment information, session information, or to briefly answer a question. With your written consent, we may also use email to correspond with your physician or other health care provider. You have the right to decline this option at any time. There are potential risks to privacy for using this means of communication—for example, if other people use your computer or email account. We maintain a secure email accounts for these circumstances, and follow HIPAA guidelines for security of electronic medical records. We use email as a convenience, and refrain from lengthy email response, therefore abstaining from therapy-by-email.

TYPES OF PAYMENT ACCEPTED

At this time we accept checks and cash in the amount due. No change is kept on the premises.