

Policies and Procedures: PLEASE SIGN

Fee Structure & Cancellation Fees: The patient is financially responsible for payment of fees, which will be collected at the time of service. The standard fee is \$140.00 per 50-minute session unless otherwise negotiated. In the event of an accrued balance, the patient and therapist can negotiate a payment schedule. You will be charged \$70.00 for cancelled appointments unless notice is received at least 24 hours prior to the appointment. Insurance companies cannot be billed for missed appointments as no services are rendered. Appointments may be canceled by leaving a message at (823) 237-2673.

Confidentiality: Information shared in session is held in strictest confidence according to federal law. Exceptions include: legal obligations (such as report of child abuse, elder abuse, testimony as required by a judge, personal danger to self or an identifiable victim); information provided to parents if the patient is a minor; and with written consent for release of information.

Patient Privacy: Recent laws have been enacted for patient privacy. It is important to know that emails and cell phone conversations are not secure or guaranteed of privacy because they can potentially be intercepted. Therefore, by signing this document you understand that if we have correspondence by email or cell phone, there is a potential for confidentiality to be compromised.

Length of Sessions: Sessions are scheduled for 50 minutes and will end 50 minutes from the start of the scheduled appointment time regardless of the time of arrival.

Communication: Mrs. Intschert does not provide therapeutic services over the phone or email between sessions. Communications outside of scheduled appointments is generally limited to administrative concerns such as canceling and rescheduling appointments, issues pertaining to records, etc. Messages for Mrs. Intschert may be left with reception at Houston Psychotherapists, Inc. Messages are generally returned when Mrs. Intschert is in the office (usually Wednesday – Friday). Messages are not returned on weekends, holidays, after hours, or when Mrs. Intschert is otherwise not in the office; therefore, it may be 2-3 days before your message is returned. Additionally, Mrs. Intschert does not generally communicate with the family members or other acquaintances of patients unless this communication has been explicitly discussed in session and a release of information has been signed.

Emergency Services: Mrs. Intschert is not able to provide emergency services. If you are in need of emergency services, please call 911 or present to the nearest emergency room. If you are not in need of emergency services, but would like to receive psychological services sooner than your next scheduled appointment, you may contact Mrs. Intschert to request an earlier appointment.

I understand and accept the policies concerning cancellations of appointments, payment for services, communication outside of sessions, and emergency services. I will be responsible for the agreed upon payment due of \$ _____ per session.

Patient's (or responsible party) Signature

Date