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PSYCHOTHERAPY SERVICES CONTRACT

*Welcome to my psychotherapy practice. I am pleased that you are considering me to help facilitate you on your path to healing. This document contains important information about my professional services and business policies. **Please read it carefully and jot down any questions you might have so that we can discuss them at our next meeting. When you sign this document, it will represent an agreement and indeed, a contract between us.***

I. PSYCHOLOGICAL SERVICES

Psychotherapy, hereafter referred to as “therapy,” is not easily described. It varies depending on the personalities of the psychologist and client, and the particular problems the client brings forward. There are many different methods used in therapy, and I may use various evidence-based methods to deal with the problems that you hope to address. Unlike a medical doctor visit, therapy calls for a very active effort on your part. In order for the therapy to be most successful, you will have to work on things we talk about both during our sessions and at home. I will typically provide tasks for you to complete in between sessions. Your follow-through is directly linked to the progress that you will see.

Psychotherapy can have benefits and risks. Since therapy often involves discussing unpleasant aspects of your life, you may at times experience uncomfortable feelings such as sadness, guilt, anger, frustration, loneliness, and helplessness. On the other hand, psychotherapy 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. But there are no guarantees of what you will experience, and no promises for what your specific outcome will be.

Our first few sessions will involve an evaluation of your treatment needs. By the end of the evaluation, I will be able to offer you some first impressions of what our work will include and a treatment plan that we will 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 me. Therapy involves a large commitment of time, money, and energy, so you should be very careful about the therapist you select. If you have questions about my procedures, we should discuss 15

them whenever they arise. If your doubts persist, I will be happy to help you set up a meeting with another mental health professional for a second opinion.

II. MEETINGS

I normally conduct an evaluation that will last from 2 to 3 sessions. During this time, we can both decide if I am the best person to provide the services you need in order to meet your treatment goals. If psychotherapy is begun, I will usually schedule one 50-minute session (one appointment hour of 50 minutes duration) per week at a time we both agree on, although some sessions may be longer or more frequent as needed. Teletherapy (remote video therapy) utilizing a secure, HIPAA compliant platform is also used given my clinical discretion, practical and logistical needs, and of course the client's comfort level with this treatment modality. Once an appointment hour is scheduled, you will be expected to pay for it unless you provide a minimum of 24 hours [1 day's] advance notice of cancellation [unless we both agree that you were unable to attend due to circumstances beyond your control]. [If it is possible, I will try to find another suitable appointment within the week].

III. PROFESSIONAL FEES

My hourly fee is \$150 (that is, \$150/50 min. session). In addition to weekly appointments, I charge this amount for other professional services you may need, though I will break down the hourly cost if I work for periods of less than one hour. Other services include report writing, telephone conversations lasting longer than 10 minutes, attendance at meetings with other professionals you have authorized, preparation of records or treatment summaries, and the time spent performing any other service you may request of me. If you become involved in legal proceedings that require my participation, you will be expected to pay for my professional time even if I am called to testify by another party. [Because of the complex nature of trials and other legal proceedings, I charge \$350 per hour for preparation and attendance at any legal proceeding.]

IV. BILLING AND PAYMENTS

You will be expected to pay for each session at the time it is held. As my practice is not a member of any insurance panels, payment can be provided via any number of alternative methods (PayPal and all major credit cards to include a flexible healthcare spending account card), and is due at the end of each session. I utilize a HIPAA compliant medical billing application (app) entitled IVY that is user friendly, and which stores your credit information securely. Receipts and appropriate documentation will be provided upon request, and I will assist you in submitting for out-of-network health insurance reimbursement if needed. (See Insurance Reimbursement Section).

Payment schedules for other professional services will be agreed to when they are requested. [In circumstances of unusual financial hardship, I may be willing to negotiate a fee adjustment or payment installment plan.] If your account has not been paid for more than 60 days and arrangements for payment have not been agreed upon (or have been agreed upon but are not being met), I have the option of using legal means to secure the payment. This may involve hiring a collection agency or going through small claims court. [If such legal action is necessary, its costs will be included in the claim.] In most collection situations, the only information I release regarding a patient's treatment is his/her name, the nature of services provided, and the amount due.

V. INSURANCE REIMBURSEMENT

While I do not belong to any insurance panels, I will complete forms as needed and provide you appropriate documentation in helping you receive the benefits to which you are entitled. In order for us 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. *However, you (not your insurance company) are responsible for full payment of my fees.* It is very important that you find out exactly what mental health services your insurance policy covers prior to beginning services. Additional options include reimbursement through a healthcare spending account that you might have.

You should carefully read the section in your insurance coverage website or booklet that describes mental health services. If you have questions about the coverage, call your plan administrator.

VI. CONTACTING ME

I am often not immediately available by telephone. While I am usually in my office in the late afternoons and evening hours, I probably will not answer the phone when I am with a patient. When I am unavailable, please feel free to leave a voicemail (which I check and monitor frequently). I will usually return calls within 24 hours (or during the next business day during weekends and holidays). If you are difficult to reach, please inform me of some times when you will be available. Given the fact that I am at times very unavailable due to patients and other professional responsibilities, **if you are unable to reach me and feel that you can't wait for me to return your call, (or are in clinical crisis), contact your family physician or the nearest emergency room and ask for the psychologist [psychiatrist] on call.** If I will be unavailable for an extended time, I will provide you with the name of a colleague to contact, if necessary.

VII. PROFESSIONAL RECORDS

The laws and standards of my profession require that I keep treatment records. You are entitled to receive a copy of the records unless I believe that seeing them would be emotionally damaging, in which case I will be happy to send them to a mental health professional of your choice. Because these are professional records, they can be misinterpreted and/or upsetting to untrained readers. I recommend that you review them in my presence so that we can discuss the contents. Patients will be charged an appropriate fee for any time spent in preparing information requests.

VIII. CONFIDENTIALITY

In general, the privacy of all communications between a patient and a psychologist is protected by law, and I can only release information about our work to others with your written permission. But there are some important exceptions. These include the following conditions, in which a report may have to be filed with the appropriate state or federal agency/authorities.

1. If I have cause to believe that you intend to harm yourself
2. If I have cause to believe that you intend to harm someone else
3. If you disclose that you have been the victim of child abuse as a minor (in the State of Maryland, even past abuse of a minor must be reported)
4. If I believe that you are actively abusing a minor child or elderly person
5. If you make a threat against national security (to include property, the President, any member of Congress), etc.

In most legal proceedings, you have the right to prevent me 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 issue a Court Order compelling my testimony if he/she determines that the issues demand it. Under this condition, I am obligated to testify or to produce records.

If I believe that a patient is threatening serious bodily harm to another, I am required to take protective actions. These actions may include notifying the potential victim, contacting the police, or seeking hospitalization for the patient. If I believe that a patient is at risk for self harm, I am obligated by law to take any one or a number of protective actions. These include contacting the authorities, seeking hospitalization for the patient, and/or contacting family members or others who can help provide protection. These situations have rarely occurred in my practice. If a such a situation occurs, I will make every effort to fully discuss it with you before taking any action.

I may occasionally find it helpful to consult other professionals about your case. During a consultation, I make every effort to avoid revealing the identity of my patient. The consultant is also legally bound to keep the information confidential. If you don't object, I will not tell you about these consultations unless I 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 that you may have at our next meeting. I 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 I am not an attorney. [If you request, I will provide you with relevant portions or summaries of the state laws regarding these issues.]

Your signature below indicates that you have read the information in this document and agree to abide by its terms during our professional relationship.

Printed Name

Signature

Date