

## Office Policy

Please read carefully, place your initials in front of each statement, sign and date the bottom, keep a signed and dated copy for yourself. Review it when you get home to familiarize yourself with it completely. Open and clear communication will foster the best treatment alliance. I encourage a phone call or an email through the HIPAA secure portal, whenever you have concerns about medications or have some other concerns that can't wait until the next appointment. And do not hesitate to press 0 on my voice mail to be connected to the answering service so that they can reach me more immediately. If you are experiencing a true medical emergency it is always best to go to the nearest emergency room or dial 911. Some of the policies below will represent a change for those of you who have been working with me but are necessary for best medical practice.

### Policy on Prescription Medication Management:

\_\_\_1) Refills will be given only at time of appointment.

\_\_\_2) Even if clinically stable, appointments are required at least every three months.

\_\_\_3) Emergency requests for "lost medications," particularly controlled substances will not be refilled without an appointment.

\_\_\_4) Requests for an early refill will not be honored without an appointment.

\_\_\_5) If you experience an intolerable side effect or adverse reaction to a medication being prescribed, it is your responsibility to contact me in a timely fashion to address this.

\_\_\_6) Other medications, nutritional supplements, certain foods, illnesses and environmental temperature changes can interact with your medications so be sure to mention this during your appointment.

### Policy on Missed Appointments:

\_\_\_1) You are responsible for your appointment so if you need to change or cancel, 48 hours notice is required, otherwise you will be billed for the missed appointment. There are no exceptions.

\_\_\_2) The fee for a missed appointment is the full fee for the appointment, not the co-pay for those who are using insurance.

\_\_\_3) If the initial evaluation is not cancelled within 48 hours of the appointment, another appointment will not be made without receiving payment for the missed, initial appointment.

Policy on Arriving Late for an Appointment:

\_\_\_1)Most insurance companies allow a 5-10 minute grace window, but later than that insurance companies will not be billed; therefore, you will be responsible for the appointment.

Policy on your Role as a Patient in Psychotherapy:

\_\_\_1)Psychotherapy is a collaborative interaction based on trust and truthfulness; my goal is to promote a therapeutic atmosphere to encourage full disclosure.

\_\_\_2)Ending psychotherapy is one of the most important phases of treatment and is best done when discussed and planned in advanced.

Policy on Billing:

\_\_\_1)Payment is due at time of the appointment, either cash or check. Credit cards are not accepted.

\_\_\_2)Insurance information available at the time of the appointment regarding your benefits, amounts for deductible and copay needs to be accurate so that you know in advance your financial responsibility of the appointment. You are encouraged to check with your insurance before making an appointment as you will be the one to have access to the most accurate information.

\_\_\_3)We will bill insurance companies for you, but you will be responsible for payment at the time of the appointment if you are using an insurance in which I am considered "out-of-network".

Policy on Reasons I Will Terminate Treatment:

\_\_\_1)Frequent cancellations and rebooking of appointments

\_\_\_2)Two missed appointments in a row

\_\_\_3)Lack of compliance with treatment recommendations

\_\_\_4)Failure to follow policy on medication management outlined above

\_\_\_5)Not paying bill in timely manner, 90 days maximum

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date