

Through the Woods Counseling of North Texas

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PRACTICE POLICIES

PAYMENT POLICY

A credit/debit card is expected to be on file for all clients.

Co-pays, deductibles and insurance co-portions are due at the time of service. Payment will be processed electronically after session is completed. Should a card be expired, the client is responsible for notifying their therapist as soon as possible.

The cost of your initial session is \$135.00. The regular session fee is \$75.00- \$130.00 for individual or family sessions. PAYMENT IS REQUIRED AT TIME OF SERVICE. TWC reserves the right to discontinue or postpone future services until payment requirement is met.

(1) You are responsible for contacting your insurance company to pre-certify benefits and/or to obtain authorization for services.

(2) TWC utilizes a third-party biller known as Headway. Through Headway, TWC is credentialed with various insurances. Please check the headway portal for verification of your insurance coverage at the link provided below.

<https://headway.co/>

TWC provides sliding scale fees to underinsured or uninsured clients respectfully. If a discount is provided, your insurance will not be billed.

(3) Sliding scale fees are based on the TOTAL NET household income (including income from ALL persons living in the home) and based on the number of people supported by the total income(s). TWC offers limited amount of sliding scale services, therefore, should a client meet the criteria for sliding scale services, a spot is not guaranteed. The counselor will provide additional resources or referrals should a client not be able to receive sliding scale services.

(4) When therapy is terminated with TWC, your account balance must be paid in full.

TREATMENT:

You must be committed to attend sessions on a regular bases for the greatest benefit from therapy or assessment. The therapist will provide you with referrals should they and/or you believe you may receive more effective treatment elsewhere. Client's CANNOT attend a session if you are UNDER THE INFLUENCE of any drugs or alcohol.

APPOINTMENTS AND CANCELLATIONS Please remember to cancel or reschedule 24 hours in advance.

You will be subject to a \$75 cancellation fee if cancellation is less than 24 hours or appointment is missed without prior notice.

The standard meeting time for psychotherapy is 55 minutes. It is up to you, however, to determine the length of time of your sessions. Requests to change the 55-minute session needs to be discussed with the therapist in order for time to be scheduled in advance.

A \$25.00 service charge will be charged for any checks returned for any reason for special handling.

Cancellations and re-scheduled session will be subject to a charge of \$75 if NOT RECEIVED AT LEAST 24 HOURS IN ADVANCE. This is necessary because a time commitment is made to you and is held exclusively for you. If you are late for a session, you may lose some of that session time.

If you are consistent in multiple missed appointments within a month period without prior warning or good cause, TWC reserves the right to refer client elsewhere for services.

TELEPHONE ACCESSIBILITY

If you need to contact me between sessions, please leave a message on my voice mail. I am often not immediately available; however, I will attempt to return your call within 72 hours. Please note that Face-to-face sessions are highly preferable to phone sessions. However, in the event that you are out of town, sick or need additional support, phone sessions or video sessions are available. If a true emergency situation arises, please call 911 or any local emergency room.

SOCIAL MEDIA AND TELECOMMUNICATION

Due to the importance of your confidentiality and the importance of minimizing dual relationships, I do not accept friend or contact requests from current or former clients on any social networking site (Facebook, LinkedIn, etc). I believe that adding clients as friends or contacts on these sites can compromise your confidentiality and our respective privacy. It may also blur the boundaries of our therapeutic relationship. If you have questions about this, please bring them up when we meet and we can talk more about it.

ELECTRONIC COMMUNICATION

I cannot ensure the confidentiality of any form of communication through electronic media, including text messages. If you prefer to communicate via email or text messaging for issues regarding scheduling or cancellations, I will do so. While I may try to return messages in a timely manner, I cannot guarantee immediate response and request that you do not use these methods of communication to discuss therapeutic content and/or request assistance for emergencies.

Services by electronic means, including but not limited to telephone communication, the Internet, fax machines, and e-mail is considered telemedicine by the State of Texas. Telemedicine is broadly defined as the use of information technology to deliver medical services and information from one location to another. If you and your therapist choose to use information technology for some or all your treatment, you need to understand that:

- (1) You retain the option to withhold or withdraw consent at any time without affecting the right to future care or treatment or risk the loss or withdrawal of any program benefits to which you would otherwise be entitled.
- (2) All existing confidentiality protections are equally applicable.
- (3) Your access to all medical information transmitted during a telemedicine consultation is guaranteed, and copies of this information are available for a reasonable fee.
- (4) Dissemination of any of your identifiable images or information from the telemedicine interaction to researchers or other entities shall not occur without your consent.
- (5) There are potential risks, consequences, and benefits of telemedicine. Potential benefits include, but are not limited to improved communication capabilities, providing convenient access to up-to-date information, consultations, support, reduced costs, improved quality, change in the conditions of practice, improved access to therapy, better continuity of care, and reduction of lost work time and travel costs. Effective therapy is often facilitated when the therapist gathers within a session or a series of sessions, a multitude of observations, information, and experiences about the client. Therapists may make clinical

assessments, diagnosis, and interventions based not only on direct verbal or auditory communications, written reports, and third person consultations, but also from direct visual and olfactory observations, information, and experiences. When using information technology in therapy services, potential risks include, but are not limited to the therapist's inability to make visual and olfactory observations of clinically or therapeutically potentially relevant issues such as: your physical condition including deformities, apparent height and weight, body type, attractiveness relative to social and cultural norms or standards, gait and motor coordination, posture, work speed, any noteworthy mannerism or gestures, physical or medical conditions including bruises or injuries, basic grooming and hygiene including appropriateness of dress, eye contact (including any changes in the previously listed issues), sex, chronological and apparent age, ethnicity, facial and body language, and congruence of language and facial or bodily expression. Potential consequences thus include the therapist not being aware of what he or she would consider important information, that you may not recognize as significant to present verbally the therapist.

MINORS

If you are a minor, your parents may be legally entitled to some information about your therapy. I will discuss with you and your parents what information is appropriate for them to receive and which issues are more appropriately kept confidential.

CUSTODY AGREEMENT & COURT ORDER DOCUMENTS: We are required by Texas Administrative Code to have a copy of any custody agreements or court orders including adoption decrees before we can see a minor for therapy. If you arrive without these documents, the appointment must be rescheduled until a copy can be obtained. Title Revised 5.26.21 22, Texas Administrative Code, Subchapter C Rule 681.41 states prior to the commencement of counseling services to a minor client who is named in a custody agreement or court order, a licensee shall obtain and review a current copy of the custody agreement or court order, as well as any applicable part of the divorce decree. A licensee shall maintain these documents in the client's record. When federal or state statutes provide an exemption to secure consent of a parent or guardian prior to providing services to a minor, a licensee shall follow the protocol set forth in such federal or state statutes

RECORDING OF SESSIONS: Under no circumstances should sessions be audio or visually recorded by clients or guardians without the consent of the therapist and discussion as to the reasons for recording the session. Recording sessions without the therapist having prior knowledge is grounds for immediate referral outside of TWC.

COURT

ALL FEES FOR COURT TESTIMONY, CORRESPONDANCE, AND/OR RECORDS MUST BE PAID IN ADVANCE. COUNSELING SERVICES MUST BE PAID AT THE TIME OF SERVICE.

Phone Consultations with Attorneys, Mediators, Family Court Counselors, District Attorneys:

\$100.00 Per Phone Consultation up to 45 minutes.

Reports and/or Client Summary for Court Attorneys:

\$100.00 Per Report

Court Deposition or Court Testimony in Civil Cases:

\$800.00 non-refundable, minimum charge for first required appearance up to 4 hours, regardless of actual time spent in court. Any additional dates or hours of appearance within a year of initial court appearance payment will require payment of \$160.00/PER

HOUR. After a year, fees start over at \$800.00 for the first 4 hours and \$160.00 for each additional hour. If court is canceled or rescheduled without 24 hours notice given, the fee still applies and is non-refundable. By law, if a county is more than 150-miles from where a therapist resides or is served, the therapist is NOT required by subpoena to appear or produce documents. Pre-payment is required.

A subpoena must be issued before the clinician can make a court appearance, deposition appearance, or deliver any records. TWC requests 48 business hours notice before the court date be given in order for the therapist to properly prepare. Party issuing subpoena will be financially responsible for the \$800.00 fee to appear.

INFORMATION FOR PARENT/GUARDIAN AND COPIES OF CLIENT'S RECORDS THAT ARE NOT COURT RELATED:

Per Texas Administrative Code 165.2 copy fees are: \$25.00 for the first 20 pages, plus \$0.50 for each additional page. Per Texas Administrative Code 165.2, TWC has 15 business days after receiving the request to provide the records.

COMPLETION OF DISABILITY PAPERWORK:

Client must be seen for at least six sessions before paperwork for disability can be completed. A charge of \$15.00 will be incurred for completing the paperwork and must be paid BEFORE completed paperwork is released.

SLIDING SCALE FEES DO NOT APPLY TO COURT ORDERED SERVICES.

TERMINATION

Ending relationships can be difficult. Therefore, it is important to have a termination process in order to achieve some closure. The appropriate length of the termination depends on the length and intensity of the treatment. I may terminate treatment after appropriate discussion with you and a termination process if I determine that the psychotherapy is not being effectively used or if you are in default on payment. I will not terminate the therapeutic relationship without first discussing and exploring the reasons and purpose of terminating. If therapy is terminated for any reason or you request another therapist, I will provide you with a list of qualified psychotherapists to treat you. You may also choose someone on your own or from another referral source.

Should you fail to schedule an appointment for three consecutive weeks, unless other arrangements have been made in advance, for legal and ethical reasons, I must consider the professional relationship discontinued.

BY SIGNING BELOW I AM AGREEING THAT I HAVE READ, UNDERSTOOD AND AGREE TO THE ITEMS CONTAINED IN THIS DOCUMENT.