

FEE POLICY:

Fees are determined on the basis of your degree of insurance coverage, as well as your ability to pay without such coverage. We ask that any payments be made at the time of service, and that checks be written to “Charis Counseling Center” or simply “Charis.” The Center will bill insurances directly, with you being responsible for co-payments or any other agreed upon portion of the fee that is not covered by the insurance company. If you have no health insurance at all, you may speak to your therapist about negotiating a reduced cash fee.

CANCELLATIONS:

We ask that you notify your therapist 24 hours in advance if you know that you will be unable to keep an appointment. Each therapist reserves the right to charge a fee for a failed session, if in his or her judgment, you have been negligent in your responsibility to contact the therapist. The minimum fee for any failed visit is \$50. Please be aware that insurance companies will not pay for such failed sessions.

EMERGENCIES:

You can reach your therapist through our voice mail system in the event of a serious emergency. By accessing your therapist’s voice mailbox through our main telephone number, you will be instructed to either activate your therapist’s pager, or to call his or her cell phone. We request that you not use this system in non-emergent situations, such as scheduling or changing an appointment, nor for discussing matters that you can address at your next scheduled appointment.

CONFIDENTIALITY:

Your therapist is ethically and legally bound to maintain confidentiality regarding material you discuss with him or her. Such information cannot be released to any other party without your written consent. In such cases, you will be asked to complete an “Authorization Form.” There are some instances, however, when information may need to be released without your verbal or written permission. These situations include the following:

- If your therapist determines that you are at serious risk to harm yourself or others – Family members, or if necessary, the police will be notified to insure the safety of yourself and others.
- If your therapist believes that a child, a handicapped person, or an elderly person in your care is suffering injury due to abuse or neglect – Appropriate agencies such as the Department of Social Services will then be notified.
- If an insurance company requires the therapist to provide information regarding diagnosis or the course of treatment, in order to provide payment for ongoing services – Charis’ “*Notice of Privacy Practices*” document explains this issue in detail, including your rights as a client to know what “*private health information*” is communicated to the insurance company.
- If a judge orders your therapist’s records of his or her sessions with you – This may occur in cases involving such issues as sexual assault, child custody, or disability determination (Worker’s Compensation). If compelled to release such data, your therapist will attempt to reveal only such information as is pertinent to the court order, and will otherwise protect the confidentiality of your sessions as much as possible.

LETTER WRITING:

Often times a client requests that his or her therapist write a letter on their behalf. This may include letters or treatment summaries to attorneys or court officials, school personnel, and other third parties. A fee of \$30 will be charged for each letter that your therapist may write on your behalf. Note that we cannot bill insurance companies for this service.

MEDICATION PRESCRIPTIONS

If you are working with one of our Psychiatric Nurses and are taking medication, it is your responsibility to ask for a written prescription for a refill when you attend your regularly scheduled sessions. A fee of \$25 will be assessed if, between sessions, you request your therapist to call in a prescription refill to your pharmacy. Insurance companies do not compensate the Nurse for the cost of the call or the time involved.

RESULTS OF COUNSELING:

During the first few sessions, you and your therapist will agree upon certain goals and objectives. Both of you are expected to fulfill your own responsibilities in the counseling relationship so that a desired outcome is achieved. However, it is possible that some unanticipated changes may occur during the counseling process that are beyond the therapist's control (e.g., a marital relationship ending in divorce).

YOUR RIGHTS AND RESPONSIBILITIES:

As a client at Charis Counseling Center, you are entitled to certain rights, and you are also responsible for particular aspects of your own care. A complete list of such rights and responsibilities is available upon request from your therapist.

PROCEDURE FOR FILING COMPLAINTS:

If at any time in your counseling experience here at Charis you have concerns about your treatment, you may engage in the process of filing a formal complaint through the following steps:

- Raise your concern(s) directly with your therapist, and attempt to reach a mutual understanding and resolution.
- If you are not fully satisfied after speaking with your therapist, ask him or her for a formal "Complaint Form" which you can complete and return to the therapist.
- The Director of Charis will then review your "Complaint Form" and make a determination regarding further steps towards reconciliation, which may include a meeting between you and the therapist mediated by another therapist or the Director.

Client's Signature _____ Date _____

(Revised June 2009)