

Trust Builders
Counseling and Consultation, LLC

Welcome to our office. We want you to feel comfortable and to be informed, so please feel free to ask any questions you may have. Thank you for choosing our practice. We look forward to working with you.

OFFICE POLICIES

- Therapy sessions are 50 minutes in length. If you are late for your appointment, please understand that the session must still end on time to avoid all further appointments from backing up.
- We are unable to take calls during therapy sessions since it disrupts the on-going therapy process. Please call and leave a message on the voice mail, and your call will be returned as soon as possible.
- When you schedule an appointment, the time is RESERVED for you, so no one else can be offered that session time. If you fail to come for your appointment or cancel within 24 working hours of your appointment, you are responsible for a \$50 missed session fee.
- To allow for the best therapeutic use of time at the end of your appointment, we ask that you make payment at the beginning of each session. The session fee is \$110 unless a Request for a Reduced Fee has been agreed upon, and fees are due at the time of service. Overdue accounts are charged 18% interest per annum. Returned checks are subject to a \$30 service charge. For your financial or time constraints, briefer sessions may be scheduled.
- Telephone consultations are prorated at the regular session rate. There are charges for correspondence, telephone consultations with professionals or other persons, preparation for legal proceedings and legal appearances. Some charges are reimbursable by insurance companies and some are not. A retainer is required for court cases.
- We will be glad, upon your request, to complete insurance forms. Please understand that your insurance coverage is an agreement between you and your insurance company. Based on your benefit eligibility, your insurance company will directly reimburse you according to their reimbursement policies. Since insurance companies vary on their reimbursement policies for providers, you need to understand your benefit eligibility.

IN POTENTIALLY LIFE THREATENING AND/OR OTHER EMERGENCY SITUATIONS (IE HOMICIDE, IMMINENT PHYSICAL HARM, SUICIDE, AND ABUSE), IT IS UNDERSTOOD THAT CONFIDENTIALITY MAY BE RESCINDED AND INFORMATION DISCLOSED FOR THE PROTECTION AND SAFETY OF ALL PARTIES INVOLVED. UNDER AN OPINION OF THE ATTORNEY GENERAL, WE ARE OBLIGED TO REPORT TO SOCIAL SERVICES OR LOCAL LAW ENFORCEMENT ANY POSSIBLE CHILD ABUSE OR NEGLECT, EVEN IF THE ALLEGED VICTIM IS NOW AN ADULT AND EVEN IF THE ALLEGED ABUSER IS DECEASED.

My signature below indicates that I have read the above policies. I understand and agree to abide by them.

Signature

Date