

# **Taylor Counseling Group**

Welcome to the Taylor Counseling Group. This document (the Agreement) contains important information about our professional services and business policies. It also contains summary information about the Health Insurance Portability and Accountability Act (HIPAA), a federal law that provides privacy protections and client rights with regard to the use and disclosure of your Protected Health Information (PHI) used for the purpose of treatment, payment, and health care operations. The law requires that your signature be obtained acknowledging that you have been provided this information before the beginning of your first session. Although these documents are long and sometimes complex, it is important that you read them carefully before your session. When you sign this document, it will represent an agreement between you and Taylor Counseling Group. You may revoke this Agreement in writing at any time.

#### COUNSELING SERVICES

Mental Health Counseling is not easily described in general statements. It varies depending on the personalities of the counselor and client and the particular problems you may be struggling with. There are many different methods your provider may use to deal with the problems that you hope to address. Counseling is not like a medical doctor visit. Instead, it calls for an active effort on your part.

Counseling can have benefits and risks. Since therapy often involves discussing unpleasant aspects of your life, you may experience uncomfortable feelings like sadness, guilt, anger, frustration, loneliness, and helplessness. On the other hand, counseling has also been shown to have many benefits. 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.

During the first few session with your provider you will develop a customized treatment plan to meet your unique goals and needs. While therapy is often most effective in regular weekly sessions (one appointment of 45 to 60 minutes in duration), you and your provider will agree to a schedule best fitted to your needs which may require more or less frequent meetings for shorter or longer periods of time.

In addition to working with you to develop a treatment plan, your provider may engage in regular supervision and consultation with other providers at the Taylor Counseling Group. We are dedicated to the future advancement of the field of counseling and the professional development of those who are actively being trained or have recently completed training in this area. Part of our dedication entails offering Practicum Students and Licensed Professional Counselor Interns (LPC Interns) an opportunity to gain first-hand experience in a private practice setting. From time to time, it may be necessary for the provider's supervisor to observe a session and to review your records. If you have any questions or would like to speak with the provider's supervisor, please let your counselor know and they will make the necessary arrangements for you to do so. All practicum students and LPC Interns are under Dr. Taylor's supervision. If you would like to contact him directly you may do so by emailing: info@taylorcounselinggroup.com.

## **GROUP THERAPY**

In addition to individual counseling services, Taylor Counseling Group also offers group therapy options. Groups are offered at various times of the day and are often closed to a certain number of members and have a set number of sessions. Should your counselor decide that you might benefit from group therapy, they will make every effort to include you in the next group opening. Group therapy includes all the limits of confidentiality and privileged communication as individual therapy (see below section regarding Limits of Confidentiality). However, your counselor is unable to guarantee that information you disclose in the group remains confidential to the group, as other group members are not bound by the same ethical and legal standards as your therapist.

# CONTACTING YOUR COUNSELOR

Our professionally trained support staff is available form 8:00 AM to 8:00 PM Monday through Friday and from 10:00 AM to 2:00 PM on Saturdays to assist with anything you need. To provide the best care possible for you our support staff takes care of all billing and insurance issues for our counselors so they can focus on you and your care. Please direct all billing, insurance, and scheduling questions to our support staff by calling (214) 530-0021 or emailing info@taylorcounselinggroup.com, You can access your invoices and schedule appointments 24/7 via our online portal through our website taylorcounselinggroup.com. If you are in an emergency please call 911 immediately or seek out your nearest emergency room.

### AFFORDABLE CARE

At Taylor Counseling Group we believe professional care should be affordable for all, as such, we endeavor to provide competitive rates and are committed to working with most major insurance companies to find a provider and treatment plan best suited for your unique therapeutic goals and needs. Please note that your individual insurance plan may contract our services at different rates. We will do our best to ensure that you have a break down of your benefits prior to therapy, but this is not always possible and is dependent on your insurance company. We do reserve the right to change these rates if it is required by your insurance plan. We will bill your insurance at our Usual and Customary Rate (UCR) of \$130 per session. All private pay clients, or clients who opt not to use their insurance, will receive a private pay discount to \$90 per session. We do offer discounted rates for Interns from \$80 to \$40 per session and for Practicum students for \$40 to \$20 per session.

A full session is considered 45 to 60 minutes in length. In addition to weekly appointments, your counselor will charge the listed rate for other professional services you may need, though you will receive a breakdown of hourly costs. Other services include letter writing,



telephone conversations lasting longer than fifteen minutes, consulting with other professionals, preparation of records or treatment summaries, and the time spent performing any other service you may request. If you become involved in legal proceedings that require your provider's participation, you will be expected to pay for all of the counselor's professional time at our full UCR of \$130 per hour including preparation and transportation costs, even if your provider is called to testify by another party.

Payment in the form of cash, check, major credit card or money order is required at the end of each session, unless you and your counselor agree otherwise. Your counselor cannot accept payment in the form of gifts or barter for services or goods.

## INSURANCE REIMBURSEMENT

If you have a health insurance policy it will usually provide some coverage for mental health treatment. Our billing department and support staff will help you with whatever assistance they can Ito maximize your benefits; however, you (not your insurance company) are responsible for full payment of your counselor's fees (unless otherwise noted by an insurance contract). It is very important that you find out exactly what mental health services your insurance policy covers. We are happy to assist you with this, but please understand that this is ultimately dependent upon your insurance company's willingness to work with us.

Carefully read the section in your insurance coverage booklet that describes mental health services. If you have questions about the coverage, call your plan administrator. It is important to note that insurance companies do not provide reimbursement for cancelled sessions; therefor you may be responsible for the full contracted insurance rate beyond your usual co-pay. To avoid any gaps in coverage, notify us immediately should your plan renew or change.

### PROFESSIONAL RECORDS

The laws and standards of the counseling profession require that your counselor keep Protected Health Information about you in your Clinical Record. You have the right to request that your counselor amend your record, restrict what information from your Clinical Record is disclosed to others and to request an accounting of most disclosures of Protected Health Information that you have neither consented to nor authorized. Except in unusual circumstances that involve danger to yourself and/or others, you may examine and/or receive a copy of your Clinical Record if you request it in writing. You should be aware that pursuant to Texas law, clinical testing and raw data are not part of a client 's record. Because these are professional records, they can be misinterpreted and/or upsetting to untrained readers. An administrative fee of \$50 per hour and a copy fee of \$0.50 per page may be assessed when records are requested.

In the event your counselor is no longer able to provide services either due to untimely death, is found to be incapacitated for an extended period of time, or is unable to practice for whatever reason, the custody of your records will be transferred to another provider with the Taylor Counseling Group. This provider will contact you to discuss future options for treatment and will work with you to find another counselor or to continue your treatment in the best way possible.

## LIMITS ON CONFIDENTIALITY

The law protects the privacy of all communications between a patient and a counselor. In most situations, your counselor can only release information about your treatment to others if you sign a written authorization form that meets certain legal requirements imposed by HIPAA. There are other situations that require only that you provide written, advance consent. Your signature on this Agreement provides consent for those activities, as follows:

- · Your counselor may occasionally find it helpful to consult other health and mental health professionals and may be required to disclose information to your insurance company. During a consultation, your counselor will make every effort to avoid revealing your identity. The other professionals are also legally bound to keep the information confidential. If you don't object, your counselor will not tell you about these consultations unless they feel that it is important to your work together. All consultations will be noted in your Clinical Record.
- You should be aware that your counselor practices with other mental health professionals and administrative staff within the Taylor Counseling Group. In most cases, your counselor will need to share protected information with these individuals for both clinical and administrative purposes, such as scheduling, billing, and quality assurance. All of the mental health professionals of the Taylor Counseling Group are bound by the same rules of confidentiality. All staff members have been given training about protecting your privacy and have agreed not to release any information outside of the practice without the permission of a professional staff member.
- · If you are involved in a court proceeding and a request is made for information concerning your diagnosis and treatment, such information is protected by counselor-patient privilege. Your counselor cannot provide any information without your (or your legal representative's) written authorization, or a court order.

There are some situations in which your counselor is legally obligated to take actions:

· If your counselor has cause to believe that a child under age 18 has been or may be abused or neglected (including physical injury, substantial threat of harm, mental or emotional injury, or any kind of sexual contact or conduct), or that a child is a victim of a sexual offense, or that an elderly or disabled person is in a state of abuse, neglect or exploitation, or that a mental health provider has engaged in sexual exploitation of a client, the law requires that they make a report to the appropriate governmental agency. Once such a report is filed, they may be required to provide additional information.



· If your counselor determines that there is a probability that you will inflict imminent physical injury on another, or that the you will inflict imminent physical, mental or emotional harm upon yourself, or others, your counselor may be required to take protective action by disclosing information to medical or law enforcement personnel or by securing hospitalization of the patient.

While this written summary of exceptions to confidentiality should prove helpful in informing you about potential problems, it is important that you and your counselor discuss any questions or concerns that you may have now or in the future.

### **BOARD OF EXAMINERS**

The field of counseling supports and encourages the reporting of unethical, harmful or illegal behavior of its clinicians. This would include any acts of discrimination; physical, emotional, or sexual abuse and misconduct along with any other laws being broken to include the use of alcohol or illegal substances while in practice with clients and the act of sexually exploiting clients. If any misconduct is encountered, please report it to the appropriate board using the contact information below:

Texas State Board of Examiners of Professional Counselors Mail Code 1982 P.O. Box 149347 Austin, Texas 78714-9347 lpc@dshs.state.tx.us (512) 834-6658

Texas State Board of Examiners of Marriage and Family Therapists Mail Code 1982 P.O. Box 149347 Austin, Texas 78714-9347 Imft@dshs.state.tx.us (512) 834-6657

Texas State Board of Social Worker Examiners Mail Code 1982 P.O. Box 14934 Austin, Texas 78714-9347 lsw@dshs.texas.gov (512) 834-6677 MINORS AND PARENTS

Clients under 18 years of age who are not emancipated and their parents should be aware that the law may allow parents to examine their child's treatment records. However, if the treatment is for suicide prevention, chemical addiction or dependency, or sexual, physical or emotional abuse, the law provides that parents may not access their child's records. For children between ages 16 and 18, because privacy in counseling is often crucial to successful progress, particularly with teenagers, it is the Taylor Counseling Group's policy to request an agreement from the client and his/her parents that the parents consent to give up their access to their child's records. If they agree, your counselor will provide them only with general information about the progress of the child's treatment and his/her attendance at scheduled sessions. Any other communication will require the child's authorization.

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

Alex Ledger

Signed by Alex Ledger on 03/18/2020, 10:49 AM (CDT) with IP address 198.72.78.2