



Lotus Psychology Group, LLC

## **PRACTICE POLICIES**

### **MEETINGS**

I normally conduct an evaluation that will last from 2 to 4 sessions. During this time, we can both decide if I am the best person to provide the services you need in order to meet your treatment goals. If we agree to begin psychotherapy, I will usually schedule one 53-minute session (one appointment hour) per week, at a time we agree on, although some sessions may be shorter, longer, or more or less frequent.

### **CANCELLATION AND NO-SHOW POLICY**

We understand that situations arise in which you must cancel your appointment. It is therefore requested that if you must cancel your appointment you provide at least 24 hours notice. This will allow others who are waiting for an appointment to be scheduled in that appointment slot. Appointments cancelled with less than 24 hours notice and patients who do not show up for their appointment, without notice of cancellation, will be subject to a \$50.00 late cancellation/No-show fee. The Cancellation and No Show fees are the sole responsibility of the patient and must be paid in full as Insurance will NOT pay for these charges. This fee may be waived in an "emergency", which is considered an event beyond your control or knowledge 24 hours ahead of time, like a snowstorm, car accident, hospitalization, or illness that keeps you from work, and this is at the discretion of your therapist.

***By signing this form you are in agreement that you have read, understand, and agree to this Cancellation and No Show Policy.***

### **PROFESSIONAL FEES**

Doctoral level clinicians charge a self-pay hourly fee of \$140 Master's level clinicians charge a self-pay hourly fee of \$110. A \$10.00 service charge will be applied to your account for any checks returned for any reason for special handling. In addition to weekly appointments, we charge these same hourly rates for other professional services you may need, though we will prorate the hourly cost if we work for periods of less than one hour. Other professional services include report writing, telephone conversations lasting 15 minutes and longer, attendance at meetings with other professionals you have authorized, preparation of treatment summaries, and the time spent performing any other service you may request of me. If you become involved in legal proceedings that requires our participation, you will be expected to pay for any professional time we spend on your legal matter, even if the request comes from another party. We charge the same rates as stated above for those professional services I am asked or required to perform in relation to your legal matter. We also charge a copying fee of \$.10 per page for records requests.

### **BILLING AND INSURANCE REIMBURSEMENT**

If you have a health insurance policy and are choosing to utilize the benefits, it is important to understand that it will usually provide some coverage for mental health treatment. We will provide you with whatever assistance we can in helping you receive the benefits to which you are entitled. However, you, not your

insurance company, are responsible for payment of services. It is very important that you find out exactly what mental health services your insurance policy covers. We will provide you with whatever information we can based on our experience and will be happy to help you in understanding the information you receive from your insurance company.

You should also be aware that most insurance companies require that I provide them with your clinical diagnosis. Sometimes I have to provide additional clinical information, such as treatment plans, progress notes, summaries, or copies of the entire record (in rare cases). I will provide you with a copy of any records I submit, if you request it. It is important to remember that you always have the right to pay for our services yourself to avoid the problems described above (unless prohibited by your insurance contract).

If your account has not been paid for more than 60 days and arrangements for payment have not been agreed upon, I have the option of using legal means to secure the payment. This may involve hiring a collection agency or going through small-claims court. If such legal action is necessary, its costs will be included in the claim. In most collection situations, the only information I will release regarding a patient's treatment is his/her name, the dates, times, and nature of services provided, and the amount due.

***By signing this form you are in agreement that you have read, understand, and agree to the Billing and Insurance reimbursement policy; that you are responsible for payment of services that insurance does not cover.***

## **Electronic Communication Policy**

### **Email Communications and Text Messaging**

We use email communication and text messaging only with your permission and only for administrative purposes unless we have made another agreement. That means that email and text exchanges with our office should be limited to things like setting and changing appointments, billing matters and other related issues. Please do not email or text your therapist about clinical matters because these forms of communication are not a secure way to contact us. If you need to discuss a clinical matter with your therapist, please feel free to call them or wait until your next session, however if you feel you are in a non life-threatening crisis then please reach out to New Oakland services at 734-422-9340 or Common Ground Resource and Crisis Center at 1-800-231-1127. If you find yourself in a life-threatening clinical emergency, do not call your therapist first as they may not be readily available, instead please call 911, go to your nearest emergency room, or call the suicide hotline 1-800-273-8255.

### **Social Media**

Your therapist may participate on various social networks, therefore it is a possibility that you may encounter each other by accident. If either of you discover that you have accidentally established an online relationship it should be discussed in session and your therapist will cancel that online relationship. We do not communicate with, or contact, any clients through social media platforms. This is because these types of casual social contacts can create significant security risks for you and has the potential to compromise the professional relationship.

### **Web Searches**

We will not use web searches to gather information about you without your permission because we believe that this violates your privacy rights. We understand however, that you might choose to gather information about your therapist in this way. If you encounter any information about your therapist through web searches, please discuss this with them during your time together so that you can deal with it and its potential impact on your treatment.

***By signing this form you are in agreement that you have read, understand, and agree to abide by the terms of The Electronic Communication Policy during our professional relationship.***