## SERVING ALL OF CENTRAL WISCONSIN — TO HELP YOU FIND WHAT'S MISSING

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## INFORMED CONSENT FOR TREATMENT

(Valid only for 15 month from dates of signing)

The following is a summary of services provided at Advocate Psychotherapy Services LLC. After you have decided to access treatment, but prior to your therapist providing services, here is the range of information that you need to know. The following information details what to expect about a variety of topics concerning your treatment at APS. This document is a part of a larger packet that is needed to sign to begin treatment; the packet also includes forms that describe your rights, HIPAA information, insurance gathering, and personal data inquiries.

**Alternatives Once Treatment Started**: Our clinic provides outpatient mental health psychotherapy only. We do not do psychological assessments or prescribe medications. Generally, we do not do any forensic or court ordered work either. If there comes a time when different services are needed, or a higher level of care indicated, then we will assist in making referrals and connections to the appropriate resources.

**Variable Outcomes and Risks to Treatment:** Most people who engage in counseling benefit from the experience; even so, it is possible for things to get worse before they get better. Change can sometimes be difficult. In addition, you may find it difficult to concentrate on other things immediately after a session. You and your therapist will work together to determine the best way to cope with your treatment so as to minimize the risks while maximizing progress.

**Benefits of Treatment Recommendations**: The goals of treatment are defined in a treatment plan that is collaborative and completed early on in the treatment processes. You have significant influence on identifying your goals and the desired benefits of the work you will do at APS. This treatment plan will be reviewed regularly in order to ensure the best possible outcomes of your treatment.

Variable and Frequency and Duration of Treatment: Each client situation is different, and the therapist approach is different, too. Therefore, how often and how long you come to treatment may be different than what you have done in the past or what you expected to occur prior to starting treatment. However, just like with the treatment plan, a collaborative effort will be made to identify the best pattern of contact in order to achieve your desired outcomes of treatment.

Client Rights and Responsibilities in Treatment: Beyond the specific rights granted to you by legislative materials, you have a right in treatment to be informed and taken well care of. Yet, you have responsibilities as well: to work on assigned homework, to attend sessions as agreed upon, to be as ready for sessions as possible, and to bring your best effort each time. Your therapist is striving for this same level of comprehensive effort as an example as well.

**Outpatient Services Available During Treatment:** As stated earlier, only outpatient psychotherapy is provided at APS. Treatment may be weekly (or twice a week in crisis situations) and can range up to quarterly contact as well, as applicable. Individual therapy is provided for adults and children (as young as age six), couples/relational services are provided, as well as family therapy at APS. No group therapy is provided, but occasionally school-based services are.

**Confidentiality:** Federal and state laws along with professional ethical standards prohibit the disclosure of any information you provide us unless we have your prior written consent. However, there are a few exceptions to this law, which are as follows:

- \* If your therapist believes that you or someone else is in clear and imminent danger of harm, your counselor is legally obligated to inform proper authorities and others in order to help prevent this harm from occurring.
- \* If there seems to be reasonable cause to suspect that a child (age 17 and under) who is being seen by your counselor in the course of professional duties has been abused or neglected, or your counselor has reason to believe that a child seen in the course of professional duties has been threatened with abuse or neglect, and that the abuse or neglect of the child will occur, shall be legally required to notify the proper authorities (as per Wisconsin statute 48.981(2)(a)).
  - \* In rare cases a court may order your therapist to disclose information about you.
  - \* If you are under the age of 14 years, your parents or legal guardian may have access to your records.

It is also possible that at some point in the future you will be required by an outside agency to sign a release allowing the agency to review your treatment records. This may only occur with a signed Release of Information that describes the information and dates that are requested. In addition, no information can be re-released without the consent of the client.

**Treatment records:** Records of any services you receive at the agency are maintained in the form of an Electronic Healthcare Record (EHR). The EHR is maintained by a HIPAA compliant and cloud-based company, PIMSY, in order to secure your records more securely than can be done in paper form. Access to these files is limited to professional and administrative staff bound by confidentiality agreements. Also, counselors may choose to keep records of any treatment related communication with you in your file such as phone notes, copies of emails, and any personal notes/papers received during counseling. In an effort to provide you with the best possible services, your counselor may choose to consult with another therapist and/or an independent psychologist or psychiatrist that may provide consulting services to our agency.

**Cost for counseling:** We strive to make sure that your therapist is a preferred provider with most of the insurance carriers in our area. However, this is not always the case, so APS advises that you call to check your own eligibility for mental health services as well as your own benefits **BEFORE YOUR FIRST APPOINTMENT.** Our billed amounts for services at the agency are the same whether insurance is billed or paid directly by you\*\*. For your information, the rates for services for all therapists at APS are (lengths of sessions are approximate and based on standard billing guidelines as determined by the insurance industry):

**Initial / First Sessions: \$295** for 60 minutes (includes time for clinic and filing system integration)

Individual Sessions: \$210 for 45 minutes
Family / Conjoint Sessions: \$225 for 50 minutes
Brief Sessions: \$140 for 30 minutes
Extended Sessions: \$280 for 60 minutes

Walk In Appointment: \$50 for 30 minutes (On the first Friday of the month with Steve Johnson only)

\*\*\*Please note that the "Self-Pay" rates (no insurance coverage) for services provided by Resident Therapists (\$90 / every session) and Therapist Interns (\$40 / every session) are discounted rates. This is because both levels of therapists need supervision because they are not independently licensed (Resident Therapists) or are still in grad school (Therapist Interns).

**Missed appointments:** Please give as much notice as possible if you have to miss an appointment. Our agency does have a policy that subjects you to a \$60 no-show fee when one occurs. Also, if an appointment is cancelled with less than 24 hours notice, you may be subject to this charge. **After three no-shows you may be referred to another therapist than the one you were seeing or even to a new agency due to the pattern.** 

Concerns regarding our services: Should you have any concerns about the services you receive at our agency, consider addressing them with your counselor, or the Director of the agency, Steve Johnson. If this is unsatisfactory, we can direct you to the Wisconsin Department of Health Services at: www.dhs.wisconsin.gov/clientrights or (608) 266-2717. You may also contact our Client Rights Specialist (CRS), whose contact information is posted conspicuously in the office.

Client / Parent Signature:	Date:
Chent / Patent Signature.	Date.