

Kris Gooding, MSW, LCSW Florida/Psychotherapy Agreement

For the purposes of helping you reach your goals of well being, I (Kris Gooding LCSW) will be providing therapy in **45 minute scheduled sessions.*** (The first 40 minutes for our work together and 5 minutes for administrative, scheduling and payment. If we have appointments regularly recurring and you have paid in advance, then your full session can be devoted to our work).

I take my role in your life goals very seriously and will, with sincere effort always try to keep scheduled appointments and fulfill any promises made to you. On occasion, it may be necessary that I cancel a scheduled or recurring appointment. I will provide the most advance notice as possible. Now, **I would like to also bring your attention to a few important matters:**

PLEASE READ THIS CONTRACT CAREFULLY

APPOINTMENTS

- 1) Please make every effort to keep all scheduled appointments that we make. I hold your appointment time once it is booked, often turning other potential clients away. Please **call me directly (301.806.0211)** with as much notice as you can give if there is something challenging your next appointment time.

CANCELLATIONS: PLEASE READ;

At minimum, **I require 48 (business) hours notice of cancellation** *(to me directly at 301-806-0211 TEXT and CALL please.)*. *This is business hours, so for instance to cancel a Monday 2pm appt I need a call or contact by the previous Thursday before 2pm.*

With proper notice of at least 2 days (48 hours from time of appointment and business day Mon-Fri) there will be no charge for cancellations.

If less than this 48 hours is given;

A fee of 80.00 will be charged for within 24 hours notice.**

The full session fee will be charged for less than 24 hours notice or no shows. *This means that if your appt is at Noon Tuesday, for instance, and I do not hear from you by Monday at Noon, a full fee will be assessed.*

**Longer sessions can be arranged in advance. Please let me know if you would like details.*

***Please note: Insurance does not cover missed or cancelled appointments; therefore you will be solely responsible for the charge for a missed session. I can not bill your insurance company for sessions where I do not see you in person.*

INSURANCE BILLING, COPAY & DEDUCTIBLES

- 2) **Payment is expected at the time services are rendered.** I am often **(but not always and with no guarantees)** able to submit an insurance claim for session (with certain insurance companies with which I am a provider), but you will be responsible for any unpaid charges. This means that if an assumption is made that you have coverage (for example of 80% of your fee) under contract with your insurance and I collect just your copay at time of service, and then your insurance is slow or does not pay what we expect for any reason- you will be expected to remit the remaining portion upon my request. Also be aware that if you have a **deductible** for mental health, until your deductible is met you will be responsible for the entire fee as per your insurance contract.
- 3) Insurance filing for the consumer is a **courtesy service** that I make an effort to provide but sometimes am unable to make happen.
- 4) **If you choose to use your insurance, your signature below on the insurance line of this form will authorize Kris Gooding to release any information necessary to your insurance company for the processing of a claim for service. You also authorize Kris Gooding to receive payment from your insurance claims.**

FEE FOR SERVICE, OUT OF NETWORK & MY RATES

- 5) Note: If you are using insurance through Medicare, Florida Blue and BCBS, Avmed, Magellan or Humana, fees for sessions are dictated by my contract with these companies as an in network provider. Please check with your provider for what part of the fee is your copay responsibility or out of pocket expense due to any deductible meeting requirements.
- 6) In some instances I can file the bill for you if you have other insurance and provide for me your plan information. If you are hoping for reimbursement through any other insurance not listed above, you will need to check with them and see what they will offer you in reimbursement for seeing me. I will provide you a proper receipt for payment that you can use to submit if I am unable to do it for you. Your session will be subject to my fee for service rates as listed below.

MY FEES:

Couples counseling (not billed through any insurance and always Fee for Service)

50 minute session: 140.00

65 min session (pre arranged): 160.00

Individual Therapy Session, intake or regular session

45 minutes (standard): 125.00

60 minutes : 140.00

PAYING FOR SESSION/FEES

- 7) **Payment is to be made to Kris Gooding at or before each session** (check, cash, Visa, MC, Amex, HSA or PayPal) for your full fee or copay as appropriate. I appreciate PayPal in advance as this leaves more session time for our work and less for administrative matters. You can **link to my PayPal account** and you do not need a PayPal account to use your credit card online as a guest to pay. This is available as a tab on my website: **find-within.com** or just search PayPal for findwithincounseling@gmail.com

COMMUNICATIONS

- 8) I am available by **phone (301-806-0211)**, text (same) or email:

kris@find-within.com (HIPAA compliant). Text messaging is acceptable for setting up appointments, or communicating brief and simple things. However, for canceling or changing meeting times or for discussing any issues of relevance, phone messages and phone calls are preferred.

OTHER SERVICES OR CHARGES

Sometimes during the course of therapy, phone sessions for immediate or troubling matters that cannot wait until the next appointment time are needed. In these cases, I am usually able to schedule a time for a call within 24 hours if you text or call me to arrange that time. I am also able to receive and answer emails if you need to process a question or concern between appointments. I do charge for email read through and reply time as follows below. Phone time cannot be billed to insurance. These are **self pay** items (and rates are discounted for current face to face clients) as follows:

20 min phone session: 60.00

40 minute phone session: 80.00

Email: 20.00 each read and reply. (kris@find-within.com)

EMERGENCIES

Due to the nature of my practice, I usually cannot offer the certainty of unscheduled phone meetings or immediate responses to emergency issues. If a situation arises for you that needs immediate attention, where you feel unsafe, or if you have any feelings or thoughts of harming yourself or others, I ask that you call 911 or another emergency contact or go to the nearest police station or hospital. If you call and I am able to answer I certainly will. If you leave a message I will try to get back to you in a timely way. However, if I am unable to answer and your situation is unsafe or critical, please take action to help yourself as described above. This is an important agreement that you will be accepting and promising by signing below. In addition, I can only guarantee a return call within one business day of your messages.

CONFIDENTIALITY

Your conversations with me are confidential. I will keep your privacy except in circumstances where a life is at risk, a child is in danger or being abused, or when you have given me consent to share certain data with a certain individual or organization. In the above circumstances, and as is appropriate I will share my decision with you.

Please also see HIPAA form, and also consider the elements and limits of privacy with any insurance use for services. Billing and the use of insurance for any medical service is subject to audit and places limits on your health record privacy. Many insurance companies conduct routine audits on their consumer's use of services and we as providers submitting for reimbursement are required per contract to return the medical data they request, sometimes including treatment notes. Please feel free to speak with me about any questions or concerns you may have about these matters.

Please sign that you have read, understood and agree to the above:

Sign:

Name_____date_____

Using insurance and wishing me to bill for you: Name _____date_____

MY CONTACT INFORMATION:

ADDRESS: 2830 NW 41ST STREET SUITE B (THORNEBROOK III) - GAINESVILLE, FL 32606

PHONE: 301-806-0211 EMAIL: KRIS@FIND-WITHIN.COM (HIPAA COMPLIANT)

MAILING ADDRESS: 5745 SW 75TH ST #129 - GAINESVILLE, FL 32608

- Session length is a standard 45 minute time based on several factors including insurance allowances. The time starts at the scheduled session meeting time regardless of arrival time. For my **basic 45 minute session, 40 minutes are dedicated to therapy and 5 minutes are allotted for scheduling and payment transactions** I provide a clock so that you can monitor the time if you wish. Longer sessions are available with planning and scheduling. There is a fee associated with adding 15, 20 or 30 minutes and can be discussed and outlined.