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 to 50 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

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

At minimum, I require 48 (business) hours notice of cancellation (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-business day Mon-Fri) there will be no charge for cancellations. If less than this 48 hours is given a late cancellation fee of 80.00 will be billed. *I can not bill insurance for services not rendered face to face.*

MY FEES

Couples counseling:

50 minute session: 130.00

65 min session (pre arranged): 150.00

Individual Therapy Session, intake or regular session:

45-50 minutes (standard): 120.00

60-65 minutes : 140.00

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. 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 kris@find-within.com

COMMUNICATIONS

I am available by phone (301-806-0211), text 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 24-48 hours if you text or call me to arrange that time. If I am unable to do so, it is expected that you make arrangements to gain support where possible. I am also able to receive and answer emails if you need to ask a question or if there is an immediate concern between appointments. I do charge for phone, and email read through and reply time as follows below:

20-30 min phone session: 80.00

40-50 minute phone session: 120.00

Email: 20.00 each read and reply

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, except when specified otherwise..

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 state HIPAA form, and also consider the elements and limits of privacy with any insurance used 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, rationale for treatment, diagnosis and other content. In addition, many insurance companies use other services for data processing or compliance and review. Once insurance is used, your health data becomes open to any of these agencies. 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_____

MY CONTACT INFORMATION:

OFFICE ADDRESS: 4001 W. NEWBERRY RD SUITE D3; GAINESVILLE FLORIDA 32607 (do not mail to this address)

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

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