



Outpatient Service Agreement Confidential Care

For a happier and healthier tomorrow

Welcome to Confidential Care. We appreciate you giving us the opportunity to be of help to you. This document 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 patient rights about the use and disclosure of your Protected Health Information (PHI) for the purposes of treatment, payment, and health care operations. Although these documents are long and sometimes complex, it is very important that you understand them. When you sign this document, it will also represent an agreement between us. We can discuss any questions you have when you sign them or at any time in the future.

Psychotherapy Services

We provide psychotherapy services for adults, couples, and families. The first appointment serves as an initial assessment. We will want to hear about the difficulties that lead you to make an appointment, goals for therapy, and general information about yourself and your current life situations. By the end of this first appointment, we will give you some initial recommendations on what we think will help. If we do not think we are able to best assist you, we will give you the names of other professionals who we believe would work well with your particular issues. If you do not agree with our treatment recommendations or do not think our personality styles will be a good match for you, let us know and we will do our best to suggest a different therapist who may be a better fit.

If you and your therapist decide to work together in therapy, you will collaborate on a treatment plan that incorporates effective strategies to help with whatever difficulties you are hoping to reduce in therapy. Sometimes more than one approach is helpful. Individual, couples, and family therapy sessions lasts 50 minutes unless otherwise arranged. Oftentimes, sessions are set for once each week, but this varies based on what's most appropriate for your particular situation.

Therapy can be extremely helpful and fulfilling, and it takes work both in and out of sessions to be most effective. It requires active involvement on your part, honesty, and openness in order to change thoughts, emotional reactions and/or behaviors. Psychotherapy can have benefits and risks. Since it 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, therapy has been shown to have many benefits. It often leads to better relationships, solutions to specific issues, and significant reduction in feelings of distress. Be aware that there are no guarantees of what you will experience, and issues can appear to worsen before improving as they unfold.

If during your work together with your therapist, noncompliance with treatment recommendations become an issue, we will make an effort to discuss this with you to determine the barriers to treatment compliance. At times, treatment noncompliance may necessitate termination of therapy services. We encourage you to discuss any concerns that you have about our work together directly so that we can address it in a timely manner.

Deciding when therapy is complete is meant to be a mutual decision, and we will discuss how to know when therapy is nearing completion. Sometimes people begin to schedule less frequently to gradually end therapy. Others feel ready to end therapy without a phasing out period of time.

Psychotherapy with Medication Management

Anyone can develop a mental health issue – you, a family member, a friend, or a co-worker. Some mental disorders are mild; others are serious and longer-lasting, but all of them can be diagnosed and effectively treated. Most people go back to living their “normal” lives after treatment. Psychiatric medications are often an important element in the successful outcome of treatment. Medications are used to treat a variety of clinical symptoms that may be related to depression, anxiety, bipolar, PTSD, ADHD, and many other mental health disorders.

Our Medication Management Service is staffed by a healthcare professional that will provide an evaluation, diagnosis, and medication intervention in the treatment of mental health disorders. Individuals receiving medication are monitored for progress, ongoing evaluation of symptoms and quality of life improvement. Persons served are educated in proper medication usage, intended benefits and adverse effects of medication and the importance of consistency in taking medications to control their clinical symptoms.

Prescription Refill Request

If you are in need of a prescription refill, please call our office at 907-357-1999 one week before your prescription(s) needs refilled. You may leave a message on our office voicemail, if needed. A scheduled appointment is required as determined by medication provider for refills or individual visit. The office does not call patients back when the prescription is called in. Please check with your pharmacy. The easiest way to refill your prescriptions is to have your pharmacy call us or fax us a medication refill request on your behalf.

Availability between Sessions

Please do not contact us through text messages or emails regarding clinical issues. These are not secure communications, and there is possibility that we will not get the message in a timely manner, or that communication will be interpreted in an unclear manner.

Our clinical and support staff are not always available to answer our office telephone. If no one is able to answer your call, our telephone is answered by a voicemail that is monitored frequently. We will make every effort to return your call on the same day you make it or at least within 24 hours, with the exception of weekends and holidays. If you leave a message, please leave your telephone number even if you think we already have it, and the best time(s) to reach you.

If you are in an emergency or crisis situation, go to the nearest emergency room or call 911. DO NOT contact us by phone or email in an emergency, as we may not get the information quickly.

Confidentiality

In general, the confidentiality of all communications between a client and a mental health clinician is protected by law, and we can only release information to others with your written permission. However, there are a few exceptions, as outlined further in the Notice of Privacy Policy. This includes mandatory reporting of suspected abuse or neglect of a child, elderly, or disabled person, protective actions of persons at risk of harm to self or others, and valid court orders requiring disclosure. *Please see Confidential Care's Notice of Privacy Policy/HIPAA for further information.*

We are ethically and legally required to take action to protect others from harm even if taking this action means we reveal information about you. For example, if we believe that a child, elderly person or disabled person is being abused or neglected, we are mandated to report this to the appropriate state agency. If we believe that a client is threatening serious harm to another person or property, we must take protective action (through notifying the potential victim, the police, and/or facilitating hospitalization of the client). We must abide by valid court orders requiring disclosure.

We would make reasonable efforts to discuss any need to disclose confidential information about you, and we are happy to answer any questions you have about the exceptions to confidentiality.

Social Media

In order to maintain your confidentiality and or respective privacy, we do not interact with current or former clients on social networking websites. We do not accept friend or contact requests from current or former clients on any social networking sites including: Twitter, Facebook, LinkedIn, etc. We will not respond to friend requests or messages through these sites.

We will not solicit testimonials, ratings or grades from clients on websites or through any means. We will not respond to testimonials, rating or grades on websites, whether positive or negative, in order to maintain your confidentiality. Our hope is that you will bring your concerns about our work together to the therapy session so we can address concerns directly.

Professional Records

Both law and the standards of our profession require that we keep appropriate treatment records. If we receive a request for information about you, you must authorize in writing that you agree that the requested information be released.

Legal Proceedings/Court Related Services

We DO NOT provide or perform evaluations for custody, visitation or other forensic matters. Therefore, it is understood and agreed upon that we cannot and will not provide any testimony or reports regarding issues of custody, visitation or fitness of a parent in any legal matter or administrative proceedings. You should hire a different mental health professional for any evaluations or testimony you require. This position is based on the following reasons: (1) My statements will be seen as biased in your favor because we have a provider – client therapy relationship. (2) The testimony might affect my therapy relationship with you and I must put this relationship first, thereby protecting the safety and confidentiality of therapy, and (3) There are other mental health professionals who specialize in court related cases.

Financial Responsibility for Services

Therapy is a commitment of time, energy, and financial resources. As a client of Confidential Care you will be required to sign a financial agreement and consent form in addition to a pre-authorized credit card payment form. Please see FINANCIAL AGREEMENT AND CONSENT and PRE-AUTHORIZED CREDIT CARD PAYMENT form for further details.

Self-Pay Clients

For those clients that are self-pay, Confidential Care will offer a 20% discount off of provider services. All self-pay clients are required to pay at the time services are rendered. Accepted forms of payment include cash, check, and major credit cards. A \$35.00 fee will be applied to your account in the event that the bank returns your check due to insufficient funds.

Questions, Concerns and/or Complaints

If you have any questions, concerns, and/or complaints about the nature of your treatment or about your billing statement, please ask or talk to us about it. We will do our best to answer your questions promptly, address your concerns openly, respond respectfully, and take your criticism seriously.

A Final Word

The therapeutic relationship is a very personal and individualized partnership. We want to know what you find helpful and what, if anything, may be getting in the way. We want you to feel free to share with your mental health clinician what they can do to help. The clinicians and the support staff here at Confidential Care look forward to working with you.



Consent to Services
Confidential Care

Please ask before signing the Outpatient Service Agreement if you have any questions or need clarification on anything that you did not understand.

Your signature below indicates that you have carefully read the Outpatient Service Agreement, understand and accept the terms of this agreement, and agree to enter therapy/treatment under these conditions.

PRINTED NAME OF CLIENT

CLIENT SIGNATURE

DATE

A copy of this Outpatient Service Agreement can also be viewed and printed from Confidential Care's Website: www.confidentialcare.org or a copy can be provided to you upon your request.

The terms of this agreement are subject to change. Any changes made to this agreement will be posted on Confidential Care's Website under: Policy Updates

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