Lighthouse Counseling Services, LLC Client Information and Office Policy Statement

Welcome to Lighthouse Counseling Services! This is an opportunity to acquaint you with information relevant to treatment, confidentiality, and office policies. Lighthouse Counseling Services will offer you courteous and professional treatment by a competent, caring counselor. Making appointments, determining financial commitments, urgent requests, and resolution of your concerns will be handled in a timely manner, with confidentiality, courtesy, and respect. Your counselor will answer any questions you have regarding any of these policies.

Office Information

Fee Policy

You are responsible for determining benefits, costs and co-payments as they pertain to your treatment. Any amount that your insurance company will not be paying is due from you at the time services are rendered. If there are any problems with meeting the financial obligations, please speak with Julie Stender. You are responsible for providing this office with copies of your insurance card(s) or any changes in your insurance or coverage. Failure to do so may result in a denial of your claim, and you may become liable for any charges. Payment is due at the time of the session unless other arrangements have been made. The standard rate is \$195 for a diagnostic session and \$150 for all other individual appointments.

Appointments

Appointments are 45-60 minutes in length.

Office Hours

Standard hours are Monday through Friday from 8:00AM – 5:00PM (some evenings appts. available).

Cancellations

If you cannot make an appointment, please notify the office at least 24 hours in advance. For late cancellations (less than 24 hours prior to appointment time) or failed appointments ('no-shows'), there will be a charge of \$100.00, which is not covered by insurance. You may leave a message or cancel 24 hours a day.

After Hours

If you are suicidal or need to be hospitalized due to a crisis situation, you may contact the 24 Hour Crisis Lines listed below by county. If your situation requires immediate attention, you may be referred to the nearest emergency room. Otherwise, please call 9-1-1.

Anoka: 763-755-3801, Carver/Scott: 952-442-7601, Dakota: 952-891-7171, Washington: 651-777-5222

Ramsey: adults - 651-266-7900, children - 651-774-7000 Hennepin: adults - 612-596-1223, children - 612-348-2233

Client Rights

Freedom From Abuse

Lighthouse Counseling Services offers dependable treatment of all clients and strictly follows the Vulnerable Adults Protection Act as described in its respective statute, section 626.557, subdivision 2D. This requirement is a protection from assault, sexual exploitation, and criminal sexual conduct.

Other Rights

You have the right to respectful care as it relates to your family's ethnic, social, religious and psychological well-being. Our responsibility is to provide your family with those services that best meet your needs in a professional and ethical manner. You have the right to seek an outside opinion from another agency and an explanation for any referral recommendations made.

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Other Responsibilities

You have a responsibility to give your counselor the information needed in order to care for you. You also have the right to participate in the planning of your mental health care, and it is expected that you will follow the treatment plan and instructions needed in order to care for you.

Additional Information

Lighthouse Counseling Service's Counselors

Our Counselors are licensed with the State of Minnesota as either LMFTs (Licensed Marriage & Family Therapists) or LP's (Licensed Psychologists).

Treatment Process

You and your counselor will work together to identify treatment options and goals. The length of treatment will vary according to individual needs and will be discussed throughout the course of your care. You are encouraged to talk as openly as possible about the problems you are experiencing so that your clinician may better assist you in treatment planning. You have the right to refuse treatment.

Clinic Responsibilities

Lighthouse Counseling Services is responsible for providing you with quality professional service. This includes treating you with respect, maintaining your confidentiality, and informing you about your condition/diagnosis and treatment options. Information about treatment options will include potential benefits and risks associated with those options. In order to meet these responsibilities, your clinician may consult with other clinicians (which would be discussed with you).

Confidentiality

Your counselor takes seriously the responsibility to hold in confidence what you discuss with him/her. Information about clients and their families is protected and confidential. Written permission is required to release any information to another agency. Exceptions to this policy only occur under certain circumstances. These are discussed in more detail on the HIPAA/Terms and Limits of Confidentiality form included in the introductory packet.

Request for Paperwork

There are times when you may need paperwork completed by the Clinician. There is a fee for filling out forms and reports. The fees vary according to the document(s) needed. Paperwork and forms can take up to 8 business days to be completed. Please deliver each paperwork request to this office as early as possible.

Record Keeping

Clinical information is maintained describing your current condition, treatment, progress, dates, notes, etc. Your records will not be released without your written consent or otherwise noted in the HIPAA/Limits of Confidentiality form in the introductory packet. Confidential records are locked/secured and kept on site.

Your Satisfaction is Important to Us

Please feel free to raise any concerns with your counselor at any time.