

**Consent for Treatment and Treatment Issues**

- The first three appointments constitute a consultation. Consultations cancelled less than 48 business hours before the appointment will not be rescheduled.
- All treatment is strictly voluntary and you may choose to stop treatment at any time you wish.
- If you experience any problem(s) with medication and/or psychotherapy, it is your responsibility to inform Dr. Keyashian of the problem(s).
- **Medication prescriptions and refills** should be dealt with during appointments. Please make sure you schedule an appointment well in advance of running out of your medication. For extenuating circumstances, please contact the office during office hours, **Monday through Friday 9am to 3pm and allow a 24 hour turnaround time.**

**Limits of Confidentiality**

- All aspects of evaluation and treatment are strictly confidential except in the following situations as mandated by law:
  - Cases in which you may be a danger to yourself or others.
  - Cases in which you are unable to care for yourself.
  - Suspected cases of child, elder or vulnerable person abuse.

**Payment Policies**

- Payment for services, including insurance copayment/deductibles, is due at the time of service.
- We require patients to keep a credit card on file with the office
- Dr. Keyashian's fee schedule follows and is subject to future increases:
  - Initial Evaluation: \$495
  - Follow-up (20-25min): \$270
  - Follow-up (45-50min): \$400
  - Dr. Keyashian is a contracted provider for Anthem and United Behavioral Health; please speak with your insurance company about your financial responsibility under your specific plan.
- **Appointments cancelled less than 48 business hours before the scheduled time will be charged for the full price of the appointment. Please note, insurance companies do not pay for missed appointments and so you will be responsible for the full insurance contracted rate.**
- Patients who arrive 15 minutes late or longer to an appointment will need to reschedule and will be responsible for the cost of the appointment as above
- Completing paperwork (including, but not limited to disability, school forms and letters) are not covered by insurance and will be charged to the patient based on time spent per the fee schedule above
- Please note Dr. Keyashian has opted out of Medicare and thus claims cannot be submitted by the office or the patient to Medicare. If you have Medicare please notify Dr. Keyashian so a private contract can be created.

**Telepsychiatry**

- **Given that Dr. Keyashian is licensed to practice medicine in California, patients must be located within California for appointments. If patients are at a different address from their address on file, they must provide that address. Patients must also be at an appropriate location for the appointment. If appointments need to be cancelled because patients are not in CA or not at an appropriate location, the patient is responsible for the full cost of the appointment.**

I have read, understood and agree to all of the terms of the office policies and procedures.

\_\_\_\_\_  
Signature of Patient

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name