



Virginia Celmer, IHM, PhD, LCDC

Licensed Psychologist

Licensed Chemical Dependency Counselor

OUTPATIENT SERVICES CONTRACT

Welcome to my practice. The members of my staff are:

Nita Hotard, Secretarial Assistant
Christy Hotard Rosenfeld, Marketing Specialist
Bill Thomas, Bookkeeper and Office Manager

This document contains important information about my professional services and business policies. Please read it carefully and jot down any questions that you might have so that we can discuss them at our next meeting. Once you sign the appropriate section on the bottom of this document and the appropriate section on the bottom of the Patient Agreement page, it will constitute a binding agreement between us.

PSYCHOLOGICAL SERVICES

Psychotherapy is not easily described in general statements. It varies depending on the personality of both the therapist and the patient and the particular concerns that each patient brings. There are a number of different approaches that can be utilized in addressing your concerns. Seeing a psychologist is not like visiting a medical doctor in that psychotherapy requires a very active effort on your part. In order to be most successful, you will have to work on things we talk about both during our sessions and at home between sessions.

Psychotherapy has both benefits and risks. Risks sometimes include experiencing uncomfortable feelings such as sadness, guilt, anxiety, anger and frustration, loneliness and helplessness. Psychotherapy often requires discussing unpleasant aspects of your life but the psychotherapeutic process has also been shown to have significant benefits for people who undertake it. Therapy often leads to a significant reduction in feelings of distress, better relationships, and resolutions of specific problems but there are no guarantees about what will happen.

Our first few sessions will involve an evaluation of your needs. By the end of the evaluation, I will be able to offer you some initial impressions of what our work will include and an initial treatment plan to follow if you decide to continue. You should evaluate this information along with your own assessment about whether you feel comfortable working with me. Therapy involves a large commitment of time, money, and energy, so you should be very careful about the therapist you select. If you have questions about my procedures, we should discuss them whenever they arise. If your doubts persist, I will be happy to help you to secure an appropriate consultation with another mental health professional.

MEETINGS

My normal practice is to conduct an evaluation that will last from 2 to 4 sessions. During this time, we can both decide whether I am the best person to provide the services that you need in order to meet your treatment objectives. If psychotherapy is initiated, I will usually schedule one forty-five minute session (one appointment hour of forty-five minutes duration) per week at a mutually agreed time. As circumstances warrant, sessions occasionally may be longer or more frequent. Once an appointment is scheduled, you will be expected to pay for it at my usual rate unless you provide 24 hours advance notice of cancellation (or unless there is a family, medical or work emergency.)

PROFESSIONAL FEES

My usual fees are as follows as of January 1, 2004:

	Office	Hospital
Initial Interview	\$175	\$200
Regular Individual Appointment	\$115	\$150
Patient with Family	\$125	\$160
Couples/Marital	\$125	n/a
Group	\$50	n/a

In addition to weekly appointments, it is my practice to charge \$100 per hour on a prorated basis for other professional services you may require such as report writing, telephone conversations which last longer than 15 minutes, attendance at meetings or consultations with other professionals which you have authorized, preparation of records or treatment summaries, or the time required to perform any other service which you may request of me. If you become involved in litigation that requires my participation, you will be expected to pay for the professional time required even if I am compelled to testify by another party. (Because of the complexity and difficulty of legal involvement, I charge \$300 per hour for preparation for, travel to and attendance at any legal proceeding.) Please note that insurance covers only our face-to-face meetings in either my office or the hospital.

BILLING AND PAYMENTS

Payment is expected at time services are rendered unless prior arrangements have been made or your insurance coverage has other requirements. Payment may be made with cash, check, money order or credit card, including health savings account cards (HSA.) Payment schedules for other professional services not covered by your insurance policy will be agreed to at the time these services are requested.

INSURANCE REIMBURSEMENT

In order for us to set realistic treatment goals and priorities, it is important to evaluate what resources are available to pay for your treatment. If you have a health insurance policy, it will usually provide some coverage for mental health treatment. I will be glad to see that your insurance is filed promptly and correctly. This filing usually occurs on a weekly basis. Generally, by your second visit, your insurance company will have been contacted and I will be able to give you information regarding your benefits. The insurance company always provides a disclaimer stating, in essence, that the information I receive from them (and pass on to you) is not a guarantee of payment. You, and not your insurance company, are responsible for payment of fees.

It is very important that you know exactly what mental health services your insurance policy covers. This information can be found in your insurance coverage booklet in the section that describes mental health services. If you have questions, you should call your plan administrator and inquire.

The escalation of the cost of health care has resulted in an increasing level of complexity about insurance benefits that sometimes makes it difficult to determine exactly how much mental health coverage is available. Managed health care plans such as HMOs and PPOs often require advance authorization before they will provide reimbursement for mental health services. These plans are often oriented towards a short-term treatment approach designed to resolve specific problems that are interfering with one's usual level of functioning. It may be necessary to seek additional approval after a certain number of sessions. In my experience, while much can be accomplished in short-term therapy, many clients feel that more services are necessary and choose to participate in non-covered services such as group or couples counseling or to continue their individual therapy after their insurance benefits expire. Cost for and payment arrangements for these non-covered/no-longer-covered services will be discussed at the time these services are requested.

You should also be aware that most insurance agreements require you to authorize me to provide a clinical diagnosis, and sometimes additional clinical information such as a treatment plan or summary, or in rare cases, a copy of the entire record. This information may become part of the insurance company files, and, in all probability, some of it will be computerized. All insurance companies claim to keep such information confidential, but once it is in their hands, I have no control over what they do with it. In some cases they may

share the information with a national medical information data bank. If you request it, I will provide you with a copy of any report I submit.

Once we have all of the information about your insurance coverage, we will discuss what we can expect to accomplish with the benefits that are available and what will happen if the insurance benefits run out before you feel ready to end our sessions. It is important to remember that you always have the right to pay for my services yourself and avoid the complexities that are described above.

CONTACTING ME

I am often not immediately available by telephone. Out of respect to my patient, I do not answer the phone when I am in session. When I am unavailable to answer the phone, your call will be answered by a confidential voice mail system. I am the only one with access to my confidential voice mailbox. If you are not experiencing an emergency, I ask that you leave me a message and I will get back to you as soon as possible. I will make every effort to return your call on the same day with the exception of weekends and holidays. If you are difficult to reach, please leave some times when you will be available to receive my call. If you are experiencing an emergency, stay on the line and have the operator page me. If you cannot wait for me to return your call, call your psychiatrist, your family physician or go to the nearest emergency room. If I am unavailable for an extended time, my answering service will connect you with a trusted colleague with whom you can speak if you wish.

PROFESSIONAL RECORDS

Both the law and the standards of my profession require that I keep appropriate treatment records. You are entitled to receive a copy of the records if you so desire. You will be charged copying costs at the current rate of \$25 for the first twenty pages and \$.15 per page for every copy thereafter. (Medical Practices Act, #165.1) If you wish, I can prepare an appropriate written summary. If you request a written summary, you will be charged an appropriate prorated amount based on my hourly fee schedule for any preparation time which is required to comply with your request. Because these are professional records, they can be misinterpreted and/or can be upsetting to lay readers. If you wish to see your records, I recommend that you review them in my presence so that we can discuss the contents.

CONFIDENTIALITY

In general, law protects the confidentiality of all communications between a client and a psychologist, and I can only release information about our work to others with your written permission. However, there are a number of exceptions.

In most judicial proceedings, you have the right to prevent me from providing any information about your treatment. However, in some circumstances such as child custody proceedings and proceedings in which your emotional condition is an important element, a judge may require my testimony if he/she determines that resolution of the issues before the court demands it.

There are some situations in which I am legally required to take action to protect others from harm, even though that requires revealing some information about a client's treatment. For example, if I believe that a child, an elderly person, or a disabled person is being abused, I must file a report with the appropriate state agency.

If I believe that a client is threatening serious bodily harm to another, I am required to take protective actions, which may include notifying the potential victim, notifying the police, or seeking appropriate hospitalization. If a client threatens to harm him/herself, I may be required to seek hospitalization for the client, or to contact family members or others who can help provide protection.

These situations have rarely arisen in my practice. Should such a situation occur, I will make every effort to fully discuss it with you before taking any action.

I may occasionally find it helpful to consult about a case with other professionals. In these consultations, I make every effort to avoid revealing the identity of my client. The consultant is, of course, also legally bound to keep the information confidential. Unless you object, I will not tell you about these consultations unless I feel that it is important to our work together.

While this written summary of exceptions to confidentiality should prove helpful in informing you about potential problems, it is important that we discuss any questions or concerns that you may have at our next meeting. The laws governing these issues are quite complex and I am not an attorney. While I am happy to discuss these issues with you, should you need specific advice, formal legal consultation may be desirable. If you request, I will provide you with relevant portions or summaries of the applicable state laws governing these issues.

THERAPY DOG

More and more evidence has been found that the presence of a trained therapeutic pet in a hospital, nursing home or health care office has promoted the health, welfare, and healing of patients. I have worked with a therapy dog in my office since 1986. Chauncey (1986-1998), an apricot poodle, was my first therapy dog.

Anna (American Kennel Club registered name Freewyn's Freudian Slippe) was a brown poodle and my second therapy dog from 1998-2009. She received the Canine Good Citizen Award (CGC) from the American Kennel Club and together we visited patients in various health care facilities in San Antonio.

Grace is an apricot/white poodle who came to me through Poodle Rescue in January, 2010. Her first four months of life were challenging to say the least. Grace has been blossoming since she came to me and has become a wonderful therapy dog.

Grace is usually in the office with me but if you do find a therapy dog's presence disturbing or distracting, please inform me and arrangements can be made for my "assistant" to be given some time off from work during your appointment.

IN CONCLUSION

Your signature below and on the Patient Agreement page indicates that you have read the information in this document and agree to abide by its terms during our professional relationship.

Date

Signature of Patient/Responsible Party

6/2015