



## **JD's Midlife Tools For Living Practices, LLC**

### **Consent for Treatment Services**

A warm welcome to you! We are honored you chose to seek services with us. Any time you have questions about the treatment process, scheduling, payments, your records please do ask us. It is important to us that your needs and concerns are openly addressed.

This form is called a Consent for Services (the "Consent"). We (your "Provider") ask you to read and sign this Consent before you start therapy. Please review the information. If you have any questions, please do ask us!

#### **THE THERAPY PROCESS**

Therapy is a collaborative process where we work together on equal footing to achieve goals that you define. This means that you will follow a defined process supported by scientific evidence, where you and your Provider have specific rights and responsibilities. Therapy generally shows positive outcomes for individuals who engage in the process. Better outcomes are often associated with a good relationship between a client and their Provider. To foster the best possible relationship, it is important you understand as much about the process before deciding to commit.

Therapy begins with the intake process. The initial appointment will involve reviewing and documenting what is bringing you to us, your life situation, personal history related to your situation and your goals or what you want to take away from treatment. From this discussion a treatment plan will emerge for your care.

The duration of treatment varies considerably and depends on the needs of each individual person. Some people attend one or two sessions, others attend much longer. Your progress and goals will be reviewed periodically.

We also will review our practice policies and procedures, talk about fees, identify emergency contacts, and you will decide if you want health insurance to pay your fees depending on your plan's benefits.

It is our hope that you will find treatment rewarding and experience positive change. However, there is no guarantee about outcomes. It is our experience that with our combined effort and commitment, positive changes can be realized.

After the initial intake session, you will attend regular therapy sessions at our office or through video, called telehealth. Therapy sessions are typically 45-60 minutes. Participation in therapy is voluntary - you can stop at any time. At some point, you will achieve your goals. We will then review your progress, identify supports that will help you maintain your progress, and discuss how to return to therapy if you need to in the future.

#### **IN-PERSON VISITS & SARS-CoV-2 ("COVID-19")**

When guidance from public health authorities allows and your Provider offers, you can meet in-person. If you attend therapy in-person, you understand:

- You can only attend if you are symptom-free (For symptoms, see: <https://www.cdc.gov/coronavirus/2019-ncov/symptoms-testing/symptoms.html>);
- If you are experiencing symptoms, you can switch to a telehealth appointment or cancel. If you need to cancel, you will not be charged a late cancellation fee.
- You must follow all safety protocols established by the practice, including:

- Following the check-in procedure;
  - Washing or sanitizing your hands upon entering the practice;
  - Adhering to appropriate social distancing measures;
  - Wearing a mask, if required;
  - Telling your Provider if you have a high risk of exposure to COVID-19, such as through school, work, or commuting; and
  - Telling your Provider if you or someone in your home tests positive for COVID-19.
- Your Provider may be mandated to report to public health authorities if you have been in the office and have tested positive for infection. If so, your Provider may make the report without your permission, but will only share necessary information. Your Provider will never share details about your visit. Because the COVID-19 pandemic is ongoing, your ability to meet in person could change with minimal or no notice. By signing this Consent, you understand that you could be exposed to COVID-19 if you attend in-person sessions. If a member of the practice tests positive for COVID-19, you will be notified. If you have any questions, or if you want a copy of this policy, please ask.

### TELEHEALTH SERVICES

To use telehealth, you need an internet connection and a device with a camera for video. Your Provider can explain how to log in and use any features on the telehealth platform. If telehealth is not a good fit for you, your Provider will recommend a different option. There are some risks and benefits to using telehealth:

#### • Risks

- **Privacy and Confidentiality.** You may be asked to share personal information with the telehealth platform to create an account, such as your name, date of birth, location, and contact information. Your Provider carefully vets any telehealth platform to ensure your information is secured to the appropriate standards.
- **Technology.** At times, you could have problems with your internet, video, or sound. If you have issues during a session, your Provider will follow the backup plan that you agree to prior to sessions.
- **Crisis Management.** It may be difficult for your Provider to provide immediate support during an emergency or crisis. You and your Provider will develop a plan for emergencies or crises, such as choosing a local emergency contact, creating a communication plan, and making a list of local support, emergency, and crisis services.

#### • Benefits

- **Flexibility.** You can attend therapy wherever is convenient for you.
- **Ease of Access.** You can attend telehealth sessions without worrying about traveling, meaning you can schedule less time per session and can attend therapy during inclement weather or illness.
- **Recommendations**
- Make sure that other people cannot hear your conversation or see your screen during sessions.
- Do not use video or audio to record your session unless you ask your Provider for their permission in advance.
- Make sure to let your Provider know if you are not in your usual location before starting any telehealth session.

### CONFIDENTIALITY

Your privacy is very important to us! Midlife Tools For Living Practices, LLC practices within the confines of the Michigan Mental Health Code as well as HIPPA (Health Insurance Portability and Accountability Act), both of which include standards of confidentiality.

We will not disclose your personal information without your permission unless required by law. If your Provider must disclose your personal information without your permission, your Provider will only disclose the minimum necessary to satisfy the obligation. However, there are a few exceptions.

- Your Provider may speak to other healthcare providers involved in your care.
- Your Provider may speak to emergency personnel.

These communications or this information may have to be revealed without your permission, as explained below:

\*If necessary to protect your safety or the safety of others.

\*If I you clearly dangerous to yourself your therapist/doctor may take steps to seek involuntary hospitalization and may also contact members of your family or others.

\*If you threaten to kill or seriously hurt someone and the therapist/doctor believes you may carry out the threat, or if the therapist/doctor believes you will attempt to kill or seriously hurt someone, your therapist/doctor may:

- tell any reasonably identified victim;

- notify the police; or

- arrange for you to be hospitalized.

\*If necessary for you to be hospitalized for psychiatric care.

\*If a judge thinks the therapist/doctor has evidence about your ability to provide care or custody in a child custody or adoption case.

\*In court proceedings involving the care and protection of children or to dispense with the need for parental consent to adoption.

\*If the therapist/doctor believes a child, a disabled person, or an elderly person in your care is suffering abuse or neglect.

\*To provide information regarding your diagnosis, prognosis and course of treatment or for purposes of utilization review or quality assurance to a third-party payer.

\*In a legal proceeding where you introduce a mental or emotional condition.

\*If you bring an action against the therapist/doctor and disclosure is necessary or relevant to a defense.

\*If necessary to use a collection agency or other process to collect amounts you owe for services.

\*If a court orders access to your records in a sexual assault or other criminal case.

\*If you authorize your therapist to consult professional colleagues if needed to enhance the clinical services you receive.

## RECORD KEEPING

We are required to keep records about your treatment. These records help ensure the quality and continuity of your care, as well as provide evidence that the services you receive meet the appropriate standards of care. Your records are maintained in an electronic health record provided by TherapyNotes. TherapyNotes has several safety features to protect your personal information, including advanced encryption techniques to make your personal information difficult to decode, firewalls to prevent unauthorized access, and a team of professionals monitoring the system for suspicious activity. TherapyNotes keeps records of all log-ins and actions within the system.

This is to notify you that Jude Vereyken has a professional will in place. I have designated a colleague to be my professional executor in the event of my death or disability who will have access to client records to notify and make referrals to other qualified professionals if needed.

## COMMUNICATION

You decide how to communicate with your Provider outside of your sessions. You have several options:

- Texting/Email

- Texting and email are not secure methods of communication and should not be used to communicate personal information. You may choose to receive appointment reminders via text message or email. You should carefully consider who may have access to your text messages or emails before choosing to communicate via either method.

- Secure Communication

- Secure communications phone calls and voice messages, are the best way to communicate personal information, though no method is entirely without risk. Due to the nature of the services provided, we may not be immediately available. During therapy sessions our phone will not be answered.

Voicemails left on our confidential voicemail will be returned as soon as possible during our normal

business hours. Our phone number is 616/217-9489.

IF YOU ARE ATTEMPTING TO REACH US AND ARE NOT FEELING SAFE, PLEASE GO TO YOUR NEAREST EMERGENCY ROOM, CALL 911, OR CALL 988.

- **Social Media/Review Websites**

- If you try to communicate with your Provider via these methods, they will not respond. This includes any form of friend or contact request, @mention, direct message, wall post, and so on. This is to protect your confidentiality and ensure appropriate boundaries in therapy.

- Your provider may publish content on various social media websites or blogs. There is no expectation that you will follow, comment on, or otherwise engage with any content. If you do choose to follow your Provider on any platform, they will not follow you back.

- If you see your Provider on any form of review website, it is not a solicitation for a review. Many such sites scrape business listings and may automatically include your Provider. If you choose to leave a review of your Provider on any website, they will not respond. While you are always free to express yourself in the manner you choose, please be aware of the potential impact on your confidentiality prior to leaving a review. It is often impossible to remove reviews later, and some sites aggregate reviews from several platforms leading to your review appearing other places without your knowledge.

- \* **Outside the Office**

- \* If we see each other accidentally outside of the therapy office, we will not acknowledge you first. Your right to private and confidentiality is of the utmost importance to us. If you acknowledge us first, we may speak briefly with you.

#### **FEES AND PAYMENT FOR SERVICES**

Initial intake session fee: \$175

Therapy session fee: \$130

Group therapy fee: \$50

Payment is due at the time of each session.

If you would like to use health insurance coverage, you are responsible for the co-pays or coinsurance at the time of service. It is important to note that you may have a deductible to meet before your insurance covers your care. If so you are responsible for the full payment until your deductible is met. You should confirm with your insurance if part or all of your fees may be covered.

You should also know about the following:

- **No-Show and Late Cancellation Fees**

- If you are unable to attend therapy, you must contact your Provider before your session. Otherwise, you will be billed a \$50 missed appointment fee. Insurance does not cover these fees.

- **Balance Accrual**

- Full payment is due at the time of your session. If you are unable to pay, please talk with us. Any balance due will continue to be due until paid in full. If necessary, your balance may be sent to a collections service.

- **Administrative Fees**

- Your Provider may charge administrative fees for writing a letter or report at your request; consulting with another healthcare provider or other professional outside of normal case management practices; or for preparation, travel, and attendance at a court appearance. These fees will be discussed with you prior to our initiation of such services. Payment is due in advance.

- **Insurance Benefits**

- Before starting therapy, you should confirm with your insurance company if:

- Your benefits cover the type of therapy you will receive;

- Your benefits cover in-person and telehealth sessions;
  - You may be responsible for any portion of the payment; and
  - Your Provider is in-network or out-of-network.
- **Sharing Information with Insurance Companies**
  - If you choose to use insurance benefits to pay for services, you will be required to share personal information with your insurance company. Insurance companies keep personal information confidential unless they must share to act on your behalf, comply with federal or state law, or complete administrative work.
- **Covered and Non-Covered Services**
  - When your Provider is in-network, they have a contract with your insurance company. Your insurance plan may cover all or part of the cost of therapy. You are responsible for any part of this cost not covered by insurance, such as deductibles, copays, or coinsurance. You may also be responsible for any services not covered by your insurance.
  - When your Provider is out-of-network, they do not have a contract with your insurance company. You can still choose to see your Provider; however, all fees will be due at the time of your session to your Provider.
- **Payment Methods**
  - Our practice requires that you keep a valid credit or debit card on file. This card will be charged for the amount due at the time of service and for any fees you may accrue unless other arrangements have been made with us ahead of time. It is your responsibility to keep this information up to date, including providing new information if the card information changes or the account has insufficient funds to cover these charges.

**COMPLAINTS**

If you feel your Provider has engaged in improper or unethical behavior, you can talk to them, or you may contact the licensing board that issued your Provider's license, your insurance company (if applicable), or the US Department of Health and Human Services: 200 Independence Ave SW Room 509F HHH Bldg. Washington D.C. 20201 Phone (800) 368-1019

**CONTACT INFORMATION**

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**\*After Hours Emergency Procedures**

If you are experiencing a crisis after normal business hours or have a life-threatening emergency, please go to the nearest emergency room for an immediate psychiatric evaluation, call 911 or call 988.

**Acknowledgement**

My signature on this document represents that I have received the Consent for Services form and that I understand and agree to the information therein.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date