

**Tania Davidson, Psy.D. PSY16510  
Clinical Psychologist**

**Outpatient Services Contract**



Welcome to my practice. This document contains important information about my professional services and business policies. Please read it carefully and jot down any questions you might have so that we can discuss them in our next meeting. When you sign this document, it will represent an agreement between us.

**PSYCHOLOGICAL SERVICES**

Psychotherapy is not easily described in general statements. It varies depending on the personalities of the psychologist and client, and the particular issues you bring to treatment. There are many different methods that Dr. Davidson may use to deal with the problems that you hope to address. These methods include cognitive behavioral, psychodynamic, play therapy with children, parent-child interaction therapy with children and parents, among others.

Psychotherapy can have benefits and risks. Approaching feelings and thoughts that a person has tried not to think about may be painful. Making changes in your thinking or behaviors can be scary and sometimes disruptive. On the other hand, clients find that their relationship with their therapist and the work done in psychotherapy results in benefits such as improved relationships, solutions to specific problems and significant reductions in feelings of distress. It is important to remember that there are no guarantees of what you will experience. There are risks involved with changing. Most people who take these risks in therapy found that it was helpful and that they have benefitted.

The first few sessions will involve an evaluation of your needs. By the end of the evaluation, Dr. Davidson will be able to offer you some first impressions of what the work will include and a treatment plan to follow, if you decide to continue with therapy. You should evaluate this information along with your own opinions of whether you feel comfortable working with Dr. Davidson. Therapy involves a significant commitment of time, money and energy, so you should be very selective

about the therapist you choose to see. If you have questions about Dr. Davidson's procedures, you should discuss them whenever they arise. If your doubts persist, Dr. Davidson will be happy to set up a meeting with another mental health professional for a second opinion.

## **MEETINGS**

Dr. Davidson normally conducts an evaluation that will last from 1 to 4 sessions. During this time, both you and Dr. Davidson can decide if she is the best person to provide the services you need in order to meet your treatment goals. If psychotherapy is begun, she usually schedules one 50-minute session per week (one appointment hour of 50 minutes duration) at a time that is agreed upon, although some sessions may be longer or more frequent. Once an appointment hour is scheduled, you will be expected to pay for it (or your insurance carrier) unless you provide at least 24 hours advance notice of cancellation. If you cancel or reschedule in less than 24 hours, you will be billed for the session at the rate you normally pay or if you use insurance, at the contracted rate for that carrier. If it is possible, Dr. Davidson will make every effort to reschedule your appointment.

## **PROFESSIONAL FEES**

Dr. Davidson's hourly fee is \$150.00. In addition to your weekly appointments, she charges this amount for other professional services you may need, though she will break down the hourly cost if she works for periods of less than one hour. Other services include report writing, telephone conversations lasting longer than 15 minutes, attendance at meetings with other professionals that you have authorized, preparation of records or treatment summaries and the time spent performing any other service that you request. If you become involved in legal proceedings that require Dr. Davidson's participation, you will be expected to pay for the professional time even if she is called to testify by another party.

## **BILLING AND PAYMENT**

You will be expected to pay for each session at the time it is held, unless it is agreed otherwise or unless you have insurance coverage which requires another arrangement. Payment schedules for other professional services will be agreed to when they are requested. In circumstances of financial hardship, Dr. Davidson may negotiate a fee adjustment or payment installment plan.

If your account has not been paid for more than 60 days and arrangements for payment have not been agreed upon, Dr. Davidson has the option to use legal means to secure payment. This may involve hiring a collection agency or going through small claims court. If such legal action is necessary, its costs will be included in the claim. In most collection situations, the only information that is released regarding a patient's treatment is his/her name, the nature of services provided and the amount due.

## **INSURANCE REIMBURSEMENT**

In order to set realistic treatment goals and priorities, it is important to evaluate what resources you have available to pay for your treatment. If you have a health insurance policy, it will usually provide some coverage for mental health treatment. Dr. Davidson will fill out forms and provide you with whatever assistance she can in helping you receive the benefits for which you are entitled; however, you (not your insurance carrier) are responsible for full payment of the fees. It is very important that you find out exactly what mental health services your insurance policy covers.

You should carefully read the section in your insurance coverage booklet that describes mental health services. If you have questions about the coverage, call your plan administrator. Of course, Dr. Davidson will provide you with whatever information she can based on her experience and will be happy to help you in understanding the information you receive from your insurance company. If it is necessary to clear confusion, she will be willing to call the insurance on your behalf.

Due to the rising costs of health care, insurance benefits have become increasingly more complex. It is sometimes difficult to determine exactly how much mental health coverage is available. "Managed Health Care" plans such as HMO's and PPO's often require authorization before they provide reimbursement for mental health services. These plans are often limited to short-term treatment approaches designed to work out specific problems that interfere with a person's usual level of functioning. It may be necessary to seek approval for more therapy after a number of sessions. While a lot can be accomplished in short-term therapy, some clients feel that they need more services after insurance benefits end. Some managed care plans will not allow Dr. Davidson to provide services once your benefits end. If this is the case, Dr. Davidson will do her best to find another provider who will help you continue your psychotherapy.

You should also be aware that most insurance companies require you to authorize Dr. Davidson to provide them with a clinical diagnosis. Sometimes, she has to provide additional clinical information such as

treatment plans or summaries, or copies of the entire chart (in rare cases). This information will become part of the insurance company's files and will likely be stored in a computer. Though all insurance companies claim to keep such information confidential, Dr. Davidson has no control over what they do with this information with a national medical information database. Dr. Davidson will provide you with a copy of any record she submits, if you request it.

Once Dr. Davidson has all the information about your insurance coverage, you and Dr. Davidson will discuss what you can expect to accomplish with the benefits that are available and what will happen if they run out before you feel ready to end your treatment sessions. It is important to remember that you always have the right to pay for Dr. Davidson's services yourself to avoid the problems described (unless prohibited by contract).

### **CONTACTING DR. DAVIDSON**

Dr. Davidson is not always immediately available by phone. While she is usually in her office between 10 AM and 8 PM, she will not answer the phone if she is with a client. When she is unavailable, her telephone is answered by voice mail that she monitors frequently. Dr. Davidson will make every effort to return your call on the same day that you make the call, with the exception of weekends and holidays. If you are difficult to reach, please inform Dr. Davidson of some times when you will be available. In emergencies, you may contact Dr. Davidson via cell phone at (714) 305-6479. If you are unable to reach Dr. Davidson and feel that you cannot wait for her to return your call, contact your family physician or the nearest emergency room and ask for the psychologist or psychiatrist on call. Dr. Davidson may be away from her office at times for professional meetings, occasional vacations and professional conferences. Clients are always to be informed well in advance of these planned absences and will have a therapist offered as back-up who can provide interim counseling and support until Dr. Davidson returns.

### **PROFESSIONAL RECORDS**

The laws and standards of the profession require that Dr. Davidson keep treatment records. You are entitled to receive a copy of your records, or she can prepare a summary for you instead. Because these are professional records, they can be misinterpreted and/or upsetting to untrained readers. If you wish to see your records, it is recommended that you review them with Dr. Davidson so that the contents can be discussed. Clients will be charged an appropriate fee for her professional time spent in responding to information requests.

## **MINORS**

If you are under eighteen years of age, please be aware that the law may provide your parents the right to examine your treatment records. It is Dr. Davidson's policy to request an agreement from parents that they agree to give up access to your records. If they agree, Dr. Davidson will provide them with only general information about your work together, unless she feels that there is a high risk that you will seriously harm yourself or another person. In this case, Dr. Davidson will notify them of her concern. She will also provide them with a summary of your treatment when it is complete. Before giving parents/guardians any information, Dr. Davidson will discuss the matter with you, and, if possible, do her best to handle any objections you may have with what she is prepared to discuss.

## **CONFIDENTIALITY**

In general, the privacy of all communications between a client and a psychotherapist are protected by law, and Dr. Davidson can only release information about your treatment to others with your written permission. There are a few exceptions.

In most legal proceedings, you have the right to prevent Dr. Davidson from providing any information about your treatment. In some proceedings involving child custody and those in which your emotional condition is an important issue, a judge may order her testimony if he/she determines that the issues demand it.

There are some situations in which Dr. Davidson is legally obligated to take action to protect others from harm, even if she has to reveal some information about the client's treatment. For example, if Dr. Davidson believes that a child or an elderly/disabled person is being abused, she is required to file a report with the County agency.

If Dr. Davidson believes that a client is threatening serious bodily harm to another, she may be required to take action to protect others. These actions may include notifying the potential victim, contacting the police or seeking hospitalization for the client. If the client threatens to harm him/herself, she may be obligated to seek hospitalization for him/her or to contact family members or others who can help provide protection and safety for the client.

These situations have occurred rarely in Dr. Davidson's practice. If a similar situation occurs, Dr. Davidson will make every effort to discuss it with you fully before any action is taken.

There are times when Dr. Davidson consults with other professional colleagues to gain greater insight and receive feedback on her work. This is an essential part of professional practice that most psychologists practice in order to provide the highest quality of treatment. If Dr. Davidson consults on her work with a client, she will not use your name or any other identifying information. If you feel that Dr. Davidson is in need of getting better information about a topic of concern for you, please let her know: she is always open to your suggestions and concerns and encourages collaboration.

All other disclosures of information, even to say that you are receiving treatment, must be authorized by you and all other information remains protected and confidential.

While this written summary of exceptions to confidentiality should prove helpful in informing you about potential problems, it is important that you discuss with Dr. Davidson any questions or concerns that you have at the next meeting. She will be happy to discuss these issues with you if you need specific advice, but formal legal advice may be needed because the laws governing confidentiality are quite complex, and Dr. Davidson is not an attorney. If you request, she will provide you with relevant portions or summaries of the State laws regarding these issues.

## **OTHER RIGHTS**

You have the right to ask questions about anything that happens in therapy. Dr. Davidson is always willing to discuss how and why she has decided to do what she is doing, and to consider alternatives that may work better. You can request that Dr. Davidson try something else you think may be more helpful. You can request information about Dr. Davidson's training in working with your particular problem, and can always choose to see another therapist if you choose. You are free to end therapy at any time and can decline services altogether if desired.

## **Responsibilities of a Therapy Client**

1. Clients are responsible for coming to their appointment on time, as scheduled. If clients are late, the session will end on time and not run into the next client's appointment time.

2. Clients who are using insurance are responsible for paying their copayment at each appointment unless other arrangements are made with Dr. Davidson.
3. The client is responsible for informing Dr. Davidson of any change in insurance coverage, address and phone number and emergency contacts.

**CONSENT TO PSYCHOTHERAPY**

I have read this statement, had sufficient time to be sure that I considered it carefully, and understand it. I consent to the use of a diagnosis in billing, and to release that information and other information necessary to complete the billing process. I understand my rights and responsibilities as a therapy client, and Dr. Davidson's responsibility to me. I agree to receiving assessment and/or treatment with Dr. Davidson as described. I know that I can end therapy at any time, and that I can refuse any requests or suggestions made by my Dr. Davidson. I agree to abide by the terms of this contract for the duration of our professional relationship.

Signed: (Client or Parent/Guardian)

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Date: \_\_\_\_\_

Witness: \_\_\_\_\_