



PSYCHIATRIC SERVICES FORM

PLEASE READ AND SIGN

Welcome to the Greater Baltimore Counseling Center, LLC. This letter contains important information about my business policies and psychiatry services. Please read this letter carefully so that we can discuss any questions you may have concerning my practice.

PSYCHIATRIC SERVICES

Psychiatry is not easily described in general statements. It varies depending on the particular problems you bring forward. There are many different methods that may be used to deal with the problems that you hope to address. Psychiatry calls for a very active effort on your part. In order for it to be most successful, you will have to work on things both during your sessions and at home, including taking your prescribed medication as directed. Psychiatry can have benefits and risks. Since psychiatry often involves discussing unpleasant aspects of your life, you may experience uncomfortable feelings like sadness, guilt, anger, frustration, loneliness, anxiety, depression and helplessness. On the other hand, psychiatry has also been shown to have benefits for people who go through it. Psychiatry often leads to better relationships, solutions to specific problems, and significant reductions in feelings of distress and anxiety. Working toward these benefits requires effort on your part.

TREATMENT

During your first session, your psychiatric nurse practitioner will assess whether he/she can be of benefit to you. If your psychiatric nurse practitioner does not think he/she can help you, he/she will let you know and try to refer you to others who work well with your particular issues. Please note that your psychiatric nurse practitioner, in his/her sole discretion, may decide not to start a practitioner-patient relationship with you after reviewing your case during the initial intake process or following your first session; similarly your psychiatric nurse practitioner reserves the right to discontinue services at any time. If you and your psychiatric nurse practitioner decide to continue, within a reasonable period of time after starting treatment, your psychiatric nurse practitioner will discuss his/her working understanding of your issues, a proposed treatment plan, and therapeutic objectives and possible outcomes of the therapy. If you have questions about any of the procedures used in the course of your treatment, their possible risks, your psychiatric nurse practitioner's expertise, or about the treatment plan in general, please ask your psychiatric nurse practitioner. You also have the right to ask about other possible treatments for your condition and their risks and benefits. If you could benefit from any treatments that your psychiatric nurse practitioner does not provide, your psychiatric nurse practitioner will provide assistance or referral information for obtaining those treatments. During the time it takes for your psychiatric nurse practitioner to evaluate you, you or your psychiatric nurse practitioner can decide if he/she is the best person to provide the services you need in order to meet your treatment goals.

Noncompliance with treatment recommendations may necessitate early termination of services. Your psychiatric nurse practitioner will look at your issues with you and exercise his/her educated judgment about what treatment will be in your best interest. Your responsibility is to make a good faith effort to fulfill the treatment recommendations to which you have agreed. If you have concerns or reservations about treatment recommendations, you are strongly encouraged to express them so that any possible differences or misunderstandings can be resolved.

If at some point your psychiatric nurse practitioner assesses that he/she is not effective in helping you reach your goals, your psychiatric nurse practitioner is obliged to discuss this with you and, if appropriate, terminate treatment and try to give you referrals that may be of help to you. You have the right to terminate treatment at any time. If you choose to do so, your psychiatric nurse practitioner may offer to provide you with names of other qualified professionals whose services you might prefer.

If you commit violence to, verbally or physically threaten or harass your psychiatric nurse practitioner or their colleagues or family, your psychiatric nurse practitioner reserves the right to terminate your treatment unilaterally and immediately. Failure or refusal to pay for services after a reasonable time is another condition for termination of services. Please contact the administrative office to discuss arrangements any time your financial situation changes.

Unless we have made other arrangements, should you not schedule an appointment for a period of 60 days and make no other arrangement with your provider, you agree that you will no longer be considered to be an active patient of our psychiatry services, and therefore have terminated psychiatric treatment. Also, if you “no show”/ “late cancel” for two consecutive appointments or “no show”/ “late cancel” for one appointment and do not reschedule within sixty days, you will be considered to have terminated your treatment relationship.

Medication management sessions typically last 20-40 minutes, are more frequent in the beginning, or after any changes are made, and then typically occur every 4-8 weeks. Duration of treatment varies depending on the nature of the treatment and individual client needs. When medications are used in psychiatry, please be advised that they are frequently used “off label” meaning that they are used to control symptoms other than what the FDA originally approved the medication to treat.

MEDICATION

If medication is prescribed, you agree to abide by your psychiatric nurse practitioner’s directions regarding your medication. Please discuss with your psychiatric nurse practitioner the effects, including any side effects, of your medication.

Benzodiazepines are not preferred in ongoing treatment in our practice. It is at the discretion of the psychiatric nurse practitioner if he/she feels it is indicated to prescribe benzodiazepines. We will work with you to discuss a transition plan and alternatives to this treatment.

TELEPHONE POLICY AND EMERGENCY SITUATIONS

Your psychiatric nurse practitioner is often not immediately available by telephone. If you need to reach your psychiatric nurse practitioner, please contact the administrative office, who will address your concerns or contact your psychiatric nurse practitioner on your behalf. Your psychiatric nurse practitioner will make every effort to return to respond within 24 hours of your message, with the exception of weekends and holidays. If you are difficult to reach, please inform your psychiatric nurse practitioner of some times when you will be available. If you are unable to reach your psychiatric nurse practitioner and feel that you can’t wait for your psychiatric nurse practitioner to return your call, contact your family physician or the nearest emergency room. Your psychiatric nurse practitioner will do his/her best to return all telephone calls within 24 hours. If your psychiatric nurse practitioner will be unavailable for an extended time, your psychiatric nurse practitioner will provide you with the name of a colleague to contact, if necessary; or, otherwise please contact the administrative office.

If an emergency situation arises, please indicate it clearly in your message to your psychiatric nurse practitioner. If your situation is an acute emergency and you need to talk to someone right away, contact the closest 24 Hour emergency psychiatric service: Dial 911 or Go to your nearest Emergency Room.

Sometimes patients have questions about their medications, side effects, pharmacy problems, or their diagnosis that come up in between appointments. Please do not hesitate to contact your psychiatric nurse practitioner to inform him/her of your questions. Your psychiatric nurse practitioner will try his/her best to answer you promptly. However, certain important clinical decisions may not be able to be made in between appointments. For example, you may need an appointment in order to start a new medication. If your situation is severe enough that it cannot be handled until the next in-person appointment, we recommend that you go to the nearest healthcare facility/ emergency room for attention.

Urgent situations are conditions that might have severe consequences if not addressed for over a few days and include (but are not limited to) acute, severe depression, mania, or extremely severe anxiety.

Emergencies include any situations where there is a question of danger to your own life or anyone else, or conditions like psychosis, where patients may be incapable of making rational decisions. In emergency situations, you should go directly to the emergency room. In addition, your provider may require you to go to the nearest emergency room. If your provider has any concern of imminent danger to yourself or someone else, your provider will also be required to involve the police or medical authorities to transport you to the nearest medical facility for evaluation, sometimes for an extended time (>24 hours).

In the event of a crisis, you may contact the following or go to the nearest emergency medical facility:

Emergency (police, fire, ambulance)

911 Nearest Emergency Room

Anne Arundel County Crisis Response System 410-768-5522

Baltimore County Crisis Response System 410-931-2214

Baltimore City Crisis Response 410-433-5175

Howard County Crisis Hotline 410-531-6677

FEES

You will be expected to pay for each session at the time it is held, unless you provide 24 hours notice of cancellation. Cancellation calls can be received by the office voice mail system any time of day or night. Fees will be charged on a prorated basis for other professional services such as report writing, clinical telephone calls, consultations, and any other services you may request of me. If you become involved in court proceedings that require my time, you will be expected to pay a retainer of \$250 per hour for my professional services, even if I am ordered to testify by another party. In the event of an unpaid balance you will receive an initial Notice of Balance from GBCC. If payment is not received within thirty days of the second letter your account will be turned over to our collections agency and a 35% collection fee will be added to the balance due.

INSURANCE REIMBURSEMENT

Please be aware that most insurance companies require me to provide a clinical diagnosis. Often, a treatment plan or summary is also required. Insurance companies are required to keep this information confidential. Many insurance plans limit the number of sessions they will help to pay for. Because I am on a number of mental health care provider panels, they may pay for services at a lower fee and I have agreed to accept the lower fee. They also determine your co-payment. After obtaining information about your insurance benefits, we will discuss what we may be able to accomplish prior to the insurance benefits ending. Should you wish to continue counseling after your insurance benefits end, I will make every attempt to set a reasonable payment schedule. Please note some managed care and employee assistance plans will not allow me to provide services after your benefits end.

CONFIDENTIALITY

In general, the confidentiality between client and provider is protected by law. I can only release information about your treatment to others with your written permission. However, there are a number of exceptions:

1. In most legal proceedings, you have the right to prevent me from providing any information about your treatment. However, a judge can require that I testify and/or release client records (for instance during a child custody hearing).
2. I am also required to report if a child, elderly person, or disabled person is being abused. In addition, I am required to report past incidents of child abuse when specific information about the abuser is available (i.e., name, address).
3. I am required to warn a potential victim if a client is threatening serious injury to someone. If a client threatens to harm him/herself, I may be required to hospitalize the client and/or contact family members.

These situations rarely arise. Should such a situation occur, I would make every effort to openly discuss what will need to occur before taking any action.

Other issues related to confidentiality: There are other times when confidentiality may become an issue.

1. If you use health insurance to pay for your treatment, I am required to include a diagnosis and often must submit a treatment plan or summary. You may request a copy of any report that I submit.
2. For people under 18 years of age, parents have a right to receive general information about treatment progress but not the specifics of what we talk about.
3. The law in Maryland requires that all participants in group or family therapy agree to the release of information. One spouse may not release information for another spouse. The records can be released only if both people agree to the release of records (i.e., waive privilege) or the Court orders that the records be released.
4. Patients have a right to receive a copy of their records. However, if I feel that information can cause emotional harm to you, I can only release the records to a person you designate who is able to understand and interpret the information properly.
5. I may feel it would be helpful to consult with another health care professional regarding your treatment. I do not reveal your name. The consultant must also keep the communication confidential.
6. Your therapist and I may confer on issues related to your treatment.
7. Some insurance companies require that I inform a primary care physician regarding your treatment. In those instances, I provide the physician the diagnosis and treatment plan, not the specifics of our communication.
8. If you ask a family member to call to find out your appointment time or whether you kept your appointment, I cannot tell them without your consent. The very fact that you are in treatment is confidential.

EMAIL COMMUNICATION

I offer my clients the opportunity to communicate by email. Transmitting information by email has a number of risks that you should consider before use. These risks include, but are not limited, to the following: email can be circulated, forwarded and stored in paper and electronic files; backup copies may exist even after the sender or recipient has deleted his/her copy; email may not be secure, and therefore it is possible that the confidentiality of such communications may be breached by a third party (i.e. email is intercepted, altered, forwarded, or used without authorization or detection).

I will limit my use of email to communicate with you only about non-sensitive and non-urgent issues such as appointment scheduling and/or billing questions. Email is not appropriate for an urgent matter or an emergency situation. You should schedule an appointment if the issue is too complex or sensitive to discuss via email. Make sure your name and/or identifying information is in the body of the message. I will check my email on a regular basis; however, there may be exceptions to this. You are responsible for following up with me or support staff if you have not received a response. Most email messages will be filed electronically in the client record. Greater Baltimore Counseling Center, LLC will never distribute a client's email address to a third party. Greater Baltimore Counseling Center, LLC is not liable for breach of confidentiality that is caused by the patient or any third party. I recommend that clients do not use employer email to communicate as some employers do not observe an employee's right to privacy in their email system. Inform me immediately of any changes in your email address or if you no longer wish to communicate via email.

I have read and understand the above information.

Signature

Date

Print Name

Witness

Date