Connection Counseling
SERVICES
Reconnecting Lives, Restoring Futures

INFORMED CONSENT

MENTAL HEALTH ASSESSMENT AND TREATMENT

All new clients will receive a mental health assessment to determine the best treatment for their presenting problem. The assessment includes a diagnostic interview and possibly questionnaires. The diagnosis from this assessment will become part of the medical and insurance records. If you choose to use your insurance benefit and wish to file for third-party reimbursement, please refer to the Client Information Sheet and the Provider Notice of Information Practices for the limits of confidentiality. The principal diagnosis and treatment plan for your presenting problem may or may not be a covered benefit in your benefits plan. If your plan will not cover the services you wish, or if you elect not to use your insurance benefit to ensure total confidentiality, the provider or the provider's office staff will discuss private pay options as needed.

EMERGENCY PROCEDURES

Call 911 and seek assistance at the closest emergency medical facility if you have a life-threatening emergency. If you are experiencing suicidal thoughts, contact the National Suicide Prevention Lifeline at 1-800-273-8255.

PAYMENT POLICIES

1. Payment is fully expected when services are provided unless alternative arrangements are agreed to in advance, in writing, or the client is a member of an EAP, HMO, PPO, or other managed care organization. If you are a member of such an organization, you will be responsible for obtaining and providing an authorization number before receiving services. If proper initial authorization is not obtained before treatment, you will be responsible for the full cost of services rendered. In addition, Connection Counseling Services, PLLC. has a legal and contractual obligation to collect your co-payment when professional services are rendered. The Client is responsible for any service fees not covered by your insurance provider.

2. If you wish to revoke authorization for Connection Counseling Services, PLLC., to release your private healthcare information to your insurance carrier, you must do so in writing.

    a. Connection Counseling Services will charge a fee for missed appointments (No-Show) and those canceled with less than 24-hour notice. If a client wishes to cancel an appointment, the client must contact the office by phone or text during the hours of 8:00 AM to 5:00 PM Monday through Friday to avoid being charged a missed appointment fee. The fee for missed appointments is $35.00. This fee is due immediately upon notification to the client and must be paid before the next appointment. Please note that insurance companies do not typically reimburse these fees for missed appointments.

3. If financial obligations are unmet, client account information will be turned over to a collection agency and appropriate legal authorities. The information provided will include the responsible party's name and social security number, the client's name, address, telephone number, and the amount due.

4. You are responsible for informing Connection Counseling Services, PLLC. of any other health insurance you may possess besides your primary insurance carrier. Failure to do so may result in you being liable for payment of services rendered if your insurance company fails to pay due to inadequate coordination of benefits.

5. My signature on this page means that I have read and understood the information presented above, as well as the Client Information Form, and that I have the legal right to make such agreements. I agree to the mental health assessment and all mental health treatment received and discussed with me by my clinician. I also state that I have read and understood the Client Information Form and Informed Consent.

_____
Signature of Client or Parent/Legal Guardian

_____ _____
Client's Name (Printed) and SS# Date