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Client Information/Consent for Treatment

Welcome to my practice. This document contains important information about my professional services and business policies. Please read it carefully, jot down any questions you might have and feel free to discuss them with me at any time. 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 problems you bring forward. There are many different methods I may use to work with the problems in living that you hope to address. Psychotherapy is not like a medical doctor visit. Instead, it calls for a very active effort on your part. In order for the therapy to be most successful, you will have to work on things we discuss both during our sessions and on your own.

Session Length:

The usual session is 45-50 minutes. I will give you my undivided attention during our sessions.

Insurance:

I am a provider for a number of HMO and PPO plans. However, it is very important that you find out exactly what mental health services your insurance policy covers. You are responsible for payment of any balance not covered by the insurance (such as deductibles, co-payments and co-insurance). You are responsible for the total fee should insurance fail to provide payment for any reason.

Professional Fees:

For those who do not use insurance, my hourly fee is \$150.00. In circumstances of financial hardship, I may be willing to negotiate a fee adjustment. You will be expected to pay for each session at the time it is held, unless we agree otherwise.

Special Charges:

These are for services such as letters, reports, forms etc. You will be billed based on the amount of time required for completion.

Contacting Me:

My telephone is answered by voice mail that I monitor frequently. I will do my best to return your call within 24 hours.

For my current clients, I provide a number to use if you need to speak with me immediately.

A charge will be assessed if the call is a psychotherapy session.

If I am away on vacation, I will provide you with the name of a colleague to contact, if necessary.

Email and phone calls:

It is important for you to know that email and cell phone communication can be relatively easily accessed by unauthorized people and can therefore compromise the privacy and confidentiality of such communication.

For that reason, I use a landline in my office. I am available by email for administrative purposes only.

Missed or cancelled Appointments:

When an appointment has been made, that time has been reserved for you. Therefore, you will be billed \$50.00 for missed appointments and appointments that are cancelled with less than 24 hours advance notice. I ask for notification of a cancellation so that I may give your appointment time to another in need. I am more than happy to reschedule your appointment and consideration is given to unexpected emergencies and illness. Insurance companies do not pay for missed or cancelled appointments.

Referrals:

If you feel that you benefit from our time together, I certainly welcome any referrals you make to my practice.

Confidentiality:

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

There are some situations in which I am legally obligated to take action to protect others from harm, even if I have to reveal 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 to the appropriate state agency.

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

These situations have rarely occurred in my practice. If a similar situation occurs, I will make every effort to fully discuss it with you before taking any action.

You should be aware that insurance companies require you to authorize me to provide them with a clinical diagnosis. Sometimes they also ask me to provide additional clinical information. Though all insurance companies claim to keep this information confidential, I have no control over it once it is in their hands.

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

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

Client Signature

Date