

Collaborative
Counseling & Psychiatry

2401 Harnish Drive, Suite 100
Algonquin, IL 60102

2210 Dean Street, Unit D
St. Charles, IL 60175

PRACTICE POLICIES

COMMUNICATION

We take pride in providing timely responses to our clients and make every attempt to return phone calls as soon as possible. We ask that you allow 48-hours or two business days for us to respond to your call or inquiry. Requests for letters, specialized referrals or other types of needs that are typically more complex may take longer and will vary between therapists and providers.

Text messages and emails are not guaranteed as secure or timely methods of communication. It is possible that messages could be received by someone other than you intended, could be delayed or could be interpreted in a manner other than how you intended. We recommend that you do not use texts or emails as a way to communicate any clinical information or concerns and only use these methods for scheduling, changing or canceling appointments. If you choose to use text or email to communicate sensitive or HIPAA protected information, you understand you are doing so at your own risk.

AVAILABILITY BETWEEN APPOINTMENTS

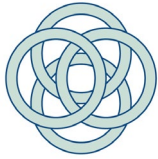
If needed, you can leave your therapist or provider a message on our 24-hour voicemail box at 847-440-2281. When you leave a message, include your telephone number even if you think we already have it, and best times to reach you. We make every effort to return calls in a timely manner. If you do not hear back from us within two business days, please leave a second message. If we are unavailable for an extended time, such as on vacation, your message will be returned by a member of our support staff or our Office Manager and they will make every attempt to address your needs or concerns. In some cases, another therapist or provider may be able to speak with you about your concerns until your therapist or provider returns. If you are experiencing an emergency, immediately go to the nearest emergency room or call 911. Collaborative Counseling and Psychiatry is not a crisis facility and we do not provide 24-hour emergency care. Do not contact us by email or fax in an emergency, as we may not get the information immediately.

RATES AND INSURANCE

Mental health treatment is a commitment of time, energy and financial resources. If you have health insurance, it is important for you to verify your mental health benefits so you understand your coverage prior to your appointment. Some insurance companies require a pre-certification before the first appointment or they will not cover the cost of services.

Our current fees are as follows:

- Patients with insurance: the negotiated rate with each insurance company
- Initial Intake Appointment: \$250.00 to \$300.00
- Counseling Sessions: \$175.00 for 60 minutes
- Medication Management: \$150.00-\$250.00 per appointment



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We are happy to assist you by having our Billing Manager file claims to your insurance company on your behalf. However, you, not your insurance company, are responsible for payment of the fee for therapy. Acceptable forms of payment include cash, check and major credit cards, and payment is expected at the time of service.

*****Cancellations or missed appointments without 24-hours notice will be subject to a fee charge, and insurance companies do not pay charges for missed appointments. *****

A credit card on file is required. If you are providing a HSA card or Debit card a secondary credit card will need to be on file for instances of insufficient funds. A Super Bill will be provided to you to submit to your Human Resource department for reimbursement. If fees for services are not paid in a reasonable amount of time, and attempts have been made to resolve the financial matter to no avail, a client account may be sent to a collection service.

*****We check insurance benefits as a courtesy for our clients. There are times when insurance misquotes benefits. In the event of a misquote, clients are still responsible for their copay/coinsurance/deductible amount that insurance reports after claims are submitted. *****

Clients can call their insurance company to check their own benefits as well by calling the number on the back of their insurance card.

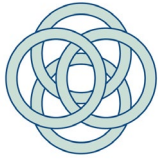
Most insurance agreements require you to authorize us to provide a clinical diagnosis and sometimes additional clinical information. If you request it, we will provide you with information to send to your insurance company. This information will become part of the insurance company's files. Insurance companies claim to keep information confidential, but you should check with your insurance company directly if you have questions about their confidentiality practices.

SOCIAL MEDIA POLICY

In order to maintain your confidentiality and our respective privacy, we do not interact with current or former clients on social networking websites. We do not accept friend or contact requests from current or former clients on any social networking sites including Facebook, Instagram, tik tok, Twitter, LinkedIn, etc. We will not respond to friend requests or messages through these sites.

We will not solicit testimonials, ratings or grades from clients on websites or through any means. We will not respond to testimonials, ratings or grades on websites, whether positive or negative, in order to maintain your confidentiality. Our hope is that you will bring concerns about our services to your therapist or provider so we can address concerns directly with you.

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PROFESSIONAL RECORDS

Both law and the standards of our profession require that we keep appropriate treatment records. If we receive a request for information about you, you must authorize in writing that you agree that the requested information released.

CONFIDENTIALITY

In general, law protects the confidentiality of all communications between a client and a mental health clinician, and we can only release information to others with your written permission. However, there are a number of exceptions, which are have indicated below. More information is provided about this in your HIPAA statement.

In judicial proceedings, if a judge orders the records released, we have to release the records. In addition, we are ethically and legally required to take action to protect others from harm even if taking this action means we reveal information about you. For example, if we believe a child, elderly person or disabled person is being abused or neglected, we are mandated to report this to the appropriate state agency. If we believe a client is threatening serious harm to another person or property, we must take protective action (through notifying the potential victim, the police, and/or facilitating hospitalization of my client). If we believe a client is a serious threat to harming him/ herself, we must take protective action (arranging hospitalization, contacting family/ significant others for notification, and/ or contacting the police). We would make reasonable effort to discuss any need to disclose confidential information about you, and we are happy to answer any questions you have about the exceptions to confidentiality.

MINORS

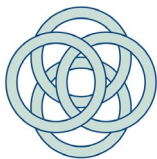
If you are under 12 years of age, please be aware that the law may provide your parents the right to examine your treatment records. If you are between the ages of 12 and 18, the law may provide your parents the right to examine your treatment records if after being informed of your parents' request to examine your records, you do not object or your therapist or provider does not find that there are compelling reasons for denying the access to the records. Notwithstanding the above, your parents are always entitled to the following information: current physical and mental condition, diagnosis, treatment needs, services provided, and services needed. Before giving them any information, your therapist or provider will discuss the matter with you, if possible, and do their best to handle any objections you may have with what is prepared to discuss.

COURT RELATED SERVICES

We do not provide or perform evaluations for custody, visitation or other forensic matters. Therefore, it is understood and agreed that we cannot and will not provide any testimony or reports regarding issues of custody, visitation or fitness of a parent in any legal matters or administrative proceedings.

If we are contacted by an attorney regarding your treatment (either at your behest or related to a legal matter you are involved in) please note the following:

- We charge a \$2000 retainer prior to any preparation or attendance of legal proceedings.



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- We charge \$250/hour to prepare for and/or attend any legal proceeding and for all court related services.
 - Charges for court related services are not covered by insurance.
 - Court related services include: talking with attorneys, preparing documents, traveling to court, depositions and court appearances.
 - If the court or attorneys do not pay our fee, you will be charged for the time we spend responding to legal matters.
 - You will also be charged for any costs we incur responding to attorneys in your case, including but not limited to fees we are charged for legal consultation and representation by our attorneys.

COMPLAINTS

If you have a concern or complaint about your treatment or about your billing statement, please talk to us about it. We will take your criticism seriously, openly, and respond respectfully.

QUESTIONS

If during the course of your treatment, you have any questions about the nature of your treatment or about your billing statement, please ask.

A FINAL WORD

Your mental health treatment journey and the relationship with your therapist and/or medication provider is a very personal and individualized partnership. We want to know what you find helpful and what, if anything, may be getting in the way. We want you to feel free to share with us what we can do to help.

Date: _____

Signature: _____
Signature of patient or responsible party if patient is a minor or
is otherwise unable to sign for themselves.

Printed Name of Patient or Responsible Party

Capacity of Responsible Party (e.g., parent, guardian, etc.)