



Challenges of Life Counseling LLC
1777 Tamiami Trl - Suite 304-2
Port Charlotte, FL 33948
(941)740-2140

Informed Consent and Client Agreement to Services
Overview of Therapy, Client Rights, Telehealth & HIPAA

Description of Services

Therapy is not easily described in general statements. It varies depending on the personalities of the therapist and client along with the particular problems you bring forward. There are many different methods we may use to deal with problems that you hope to address. Therapy 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 at home.

Therapy can have benefits and risks. Therapy can lead to better relationships, solutions to specific problems and significant reduction in feelings of distress. However, there are no guarantees of what you will experience. Since therapy often involves discussing unpleasant aspects of your life, you may experience uncomfortable feelings like sadness, anger, frustration, loneliness, and guilt. However, it is our goal to assist you to develop greater contentment in your life along with productive coping skills for any further challenges you may face.

Your initial session will involve an evaluation of your needs. Your therapist will then offer you some first impressions of what your work will include and identify your treatment goals. You should consider this information along with your own opinion of whether you feel comfortable working with your therapist. Therapy involves a large commitment of time, money, and energy so you should be comfortable with your therapist. If not, please ask for a referral to another provider who may better meet your needs.

Limitations of Services

Our services focus on assisting you to address the challenges you face at this time. This allows you, as the client, a safe place to process difficult circumstances and/or emotions. However, we are not trained to address or offer opinions on active or anticipated civil or criminal matters. Nor do we offer assessment of fitness for parenting, disability eligibility, employment issues, and/or workmen compensation benefits.

Phone Contact Between Appointments

You can leave a voicemail at any time that will be returned that day or the following morning with the exception of weekends and holidays. If there is a clinical emergency, please call 911 or go to nearest ER.

Payment for Services

The information received from your insurance company will be reviewed with you at your first session. Your insurance company will be billed directly with your Assignment of Benefits & Direct Payment to us. You will be expected to pay for each session at the time it is held (self-pay fee, insurance copay or insurance deductible.) In circumstances of unusual financial hardship, we can discuss an adjustment of a self-pay fee or payment installment plan for your share of insurance coverage. You can access a current statement of your fees and payments on your client portal @ www.therapyappointment.com. You can use your HSA or FSA debit card (from your employer) to cover the cost of services. Debit or credit card payments are processed electronically and your card number is encrypted into your account.



Challenges of Life Counseling LLC
1777 Tamiami Trl - Suite 304-2
Port Charlotte, FL 33948
(941)740-2140

Informed Consent and Client Agreement to Services
Overview of Therapy, Client Rights, Telehealth & HIPAA (page 2)

Treatment Records

The laws and standards of our profession require that we keep treatment records. Your physician may like a summary of your treatment to assist in treatment planning for any physical health issues you may have. With your signed permission, we can contact your physician with a summary of your progress. You are also entitled to receive a treatment summary or copy of your records which we would review with you or forward it directly to a mental health professional of your choice.

You should also know that most insurance companies require a clinical diagnosis in order to pay for our services. Sometimes we have to provide clinical information such as treatment plans or summaries as part of your insurance requirements. We make every effort to keep the release of any information to insurance companies minimal. Your insurance company can request your full record of treatment goals and progress notes. However, this is rare, but your record would become part of the insurance company's files. Though all records should remain confidential, agencies in some cases may share the information with a national medical database. We will make every effort to keep your record confidential and do not release personal psychotherapy notes that assist your therapist in your treatment.

Late Cancellation of Session or Missed Appointments

We strive to offer appointments to clients as quickly as possible. In order to do so, we need to be able to know when you are unable to keep an appointment so we may contact someone on a waiting list. Therefore, we have established a policy to balance the needs of those who have to forego an appointment with those seeking one.

Morning Appointment Cancellation - Cancel by 9PM the previous evening

Afternoon Appointment Cancellation - Cancel by 9 AM the same day

Evening Appointment Cancellation - Cancel by Noon the same day

If you cancel an appointment later than these times or miss your appointment you will be reminded of this policy. The second time it occurs there is a \$40 charge.

HIPAA Rights & Confidentiality Please review the document provided to you in your client portal.

Telehealth Policies If applicable, please review the document provided to you in your client portal.

-
- 1) **I HAVE REVIEWED & AGREE TO THE POLICIES OUTLINED IN THIS & HIPAA DOCUMENT**
 - 2) **Permission to Bill Insurance: If covered by insurance, I agree to allow Challenges of Life Counseling LLC to bill my insurance directly.**
 - 3) **Assignment of Insurance Benefits: I agree to have insurance benefits assigned and paid directly to Challenges of Life Counseling LLC.**

Please click to allow electronic signature to be recorded and dated in your Client Record.