



Angie Lynn, LCSW, RPT-S
Licensed Specialist Clinical Social Worker
Registered Play Therapist - Supervisor

Welcome! This form was developed in order to introduce myself and to inform you of my policies and procedures. After reading, please feel free to ask any questions you may have.

CONFIDENTIALITY

Typically, information shared with a therapist is protected and cannot be shared with anyone else. In most circumstances I require a written release of information before disclosing any information to a third party. However, I may be required by law to provide information in order to protect another person, protect a client from harming themselves, or to report suspected child abuse. I may also need to release information if emergency treatment becomes necessary. Clients will be informed if I must report information to a third party. Court ordered release of records are rare, but do occur. I will make every effort to protect a client's confidentiality in these cases. I will notify clients of any disclosure.

You have a right, in most instances, to review your records. I request that we review information together so that I may explain clinical language.

In cases where a minor is my client, parents/guardians are entitled to information regarding the child's treatment. I will provide parents/guardians with information about the treatment plan, progress toward goals, and what the parent/guardian can do to assist. If the minor is engaging in activity that will be harmful to themselves or others, the client and myself will decide how to best notify the parent/guardian. Other forms/procedures may be needed in the future and clients will be notified at that time of requirements.

CONSULTATION

Effective clinicians continue to learn throughout their career. I regularly attend continuing education trainings in order to improve my skills. Part of the learning process includes consulting with other clinicians. I do consult with other clinicians in order to review my work. Only the most general of information is given in order to ensure confidentiality. Those clinicians with whom I consult are bound legally and ethically by the same rules of confidentiality as myself.

FINANCIAL AGREEMENT

Intake	\$175.00
50 Minute Therapy Session	\$125.00
Court Reports	\$125.00

The intake session is billed at a higher rate in order to account for the initial paperwork to be completed and entered. Sessions over 75 minutes are billed at 1½ the standard rate.

Co-pays are due at the time of service. Account balances must be current in order to continue scheduling. I reserve the right to utilize a collection agency in the event balances are left unpaid.

Twenty-four hour notice is required on all cancellations in order to avoid a charge. Appointments missed without proper notification are subject to the following charges and may result in the cessation of services. No show fees are to be paid before the next scheduled appointment. Please note: Insurance companies do not pay for missed appointments or phone calls.

No show fees:

1st Incident – \$25.00 at clinician discretion

2nd Incident – \$125.00 fee is charged and treatment services are subject to termination

I accept most major insurance plans. It is the client's responsibility to contact their insurance company in order to assess the need for a referral from the primary care physician, obtain coverage benefits, deductibles, and co-pays. We are happy to bill your insurance carrier if provided with the necessary paperwork. Please note that other services, except those involving direct contact with a client, may not be covered by insurance. These include report writing, attendance at meetings, and consultation with family members. Insurance companies may require that I provide them with information regarding current concerns, treatment plans, and interventions utilized. A diagnosis is always required. Please be aware that insurance companies do not cover services if a client does not meet criteria for a psychiatric diagnosis. If you have questions about your diagnosis, or any other information and how it will be used, please don't hesitate to ask.

Due to being in session and schedule restrictions, I may not often be able to answer my phone. My telephone does have voicemail access day and night which I monitor regularly. If your call is a clinical emergency, you will have the option of having me paged through my voicemail. You may also contact Prairie View at 284-6400, Via Christi St. Joseph at 689-4850, COMCARE at 660-7500, or the nearest emergency room.

Thank you for choosing to share this important part of your life and I look forward to working with you.

Angie Lynn holds a Master's Degree in social work. Beyond that she is licensed as a Licensed Specialist Clinical Social Worker (LSCSW) and is a Registered Play Therapist - Supervisor (RPT-S).

My signature indicates I have read and understand the information and agree to the policies as stated.

Client/Parent/Guardian Signature

Date