

Jessica Vincenzo, LCSW, OSW-C



-What you seek is seeking you-

OUTPATIENT SERVICES CONTRACT

Welcome to my practice. This document contains important information about my professional services and business policies. When you sign this document, it will represent an agreement between us. Jessica Vincenzo is a licensed clinical social worker licensed by the Oregon State Board of Licensed Social Workers as well as the Board of Oncology Social Work and is a member of the National Association of Social Workers and Association of Oncology Social Workers and has completed the Level 3 Practicum Training in Gottman Method Couples Therapy. Jessica Vincenzo, LCSW provides a range of psychological services including counseling, consulting, and evaluations to individuals and couples in a practice that covers adults.

PSYCHOLOGICAL SERVICES. Therapy is unique. Treatment may vary depending on the personalities of the client(s), and the particular issues and concerns brought forward. Psychotherapy is not like some traditional medical doctor visits. 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 talk about both during our sessions and at home.

Therapy can have benefits and risks. Since therapy often involves discussing unpleasant aspects of your life, you may experience uncomfortable feelings like sadness, guilt, anger, frustration, loneliness, and helplessness. On the other hand, psychotherapy has also been shown to have benefits for people who go through it. Therapy often leads to better relationships, solutions to specific problems, and significant reductions in feelings of distress. But there are no guarantees of what you will experience. If you have questions about my procedures, we should discuss them whenever they arise. If your doubts persist, I will be happy to help you set up a meeting with another mental health professional for a second opinion. If following our conversations you have a specific grievance that is unresolved and you would like further resolution, you may contact the State Board of Licensed Social Workers, 3218 Pringle Road SE, Suite 240 Salem, OR 97302-6310 503-378-5735.

CONFIDENTIALITY. Information that you share in treatment is held in the strictest confidence possible under law. Jessica Vincenzo, LCSW will not release information you have disclosed to him in the course of treatment or evaluation, with the following exceptions.

1. Information that you pose a "clear and imminent" danger to yourself or others.
2. Information that would assist others treating you for a medical emergency.
3. Information necessary for your insurance company to process your claim.
4. Information about treatment of minor children may in some cases be disclosed to their parents.
5. A judge may order my testimony if he/she determines that the issues demand it.
6. If you have been referred, Jessica Vincenzo, LCSW will ask that you sign an authorization releasing the result to the referring agency.

While this written summary of exceptions to confidentiality should prove helpful in informing you about potential problems, it is important that we discuss any questions or concerns that you may have as soon as they arise.

APPOINTMENTS. Sessions are made by appointment only. We will usually schedule one or two 50-minute or 80-minute sessions per week at a time we agree on. **Once an appointment is scheduled, you will be expected to pay for it unless you provide 24 hours advance notice of cancellation.** If possible, I will try to find another time to reschedule the appointment.

PROFESSIONAL FEES. My fee for 50 minute sessions is \$125.00 per Couples session and \$110 for Individual Session. My fee for 80 minute sessions is \$175 per Couples Sessions and \$135.00 for Individual Sessions. New Evaluations are \$190.00 for a couples session which includes the expense of an on-line assessment and \$150 for individual. In addition to therapy or evaluations, other billable services include report writing, telephone conversations lasting longer than 10 minutes, attendance at meetings with other professionals you have authorized, preparation of records or treatment summaries, and the time spent performing any other service you may request of me. I will pro rate the hourly cost if I work for periods of less/more than one hour.

INSURANCE, BILLING, AND PAYMENTS. You will be expected to pay for each session at the time it is held, unless we agree to bill your insurance company. However, your copayment is due in full each session. If you have insurance that covers mental health treatment, I will provide you with whatever assistance I can in helping you receive the benefits to

Jessica Vincenzo, LCSW, OSW-C



-What you seek is seeking you-

which you are entitled; however, you (not your insurance company) are responsible for full payment of my fees. It is very important that you find out exactly what mental health services your insurance policy covers. The exact amount of your payment to JESSICA VINCENZO, LCSW OSW-C at the time of your appointment depends upon your specific insurance plan. Your specific portion of your payment is due at each session. Some managed-care plans will not allow me to provide services to you once your benefits end. If this is the case, I will do my best to find another provider who will help you continue your psychotherapy.

Some patients choose to pay “out of pocket” (rather than use insurance) to protect their privacy and/or for psychotherapy not intended to treat a “medically necessary” condition. Couples therapy is just one example. Some patients complete treatment for a “medically necessary” condition or diagnosis and want long-term treatment because they believe it to be beneficial, but their insurance provider doesn’t offer that as a covered benefit. Please let me know if prefer to pay “out of pocket” for your psychotherapy rather than use your insurance. **Payment in full is due at the time the service is provided.**

You should also be aware that most insurance companies require you to authorize me to provide them with a clinical diagnosis. Sometimes I have to provide additional clinical information such as treatment plans or summaries, or copies of the entire record (in rare cases). This information will become part of the insurance company files and will probably be stored in a computer. Though all insurance companies report they keep such information confidential, I have no control over what they do with it once it is in their hands. In some cases, they may share the information with a national medical information databank. I will provide you with a copy of any report I submit, if you request it. Once we have all of the information about your insurance coverage, we will discuss what we can expect to accomplish with the benefits that are available and what will happen if they run out before you feel ready to end our sessions. It is important to remember that you always have the right to pay for my services yourself to avoid the problems described above, unless this is prohibited by contract.

If your account has not been paid for more than 60 days and arrangements for payment have not been agreed upon, I have the option of using legal means to secure the payment. This may involve hiring a collection agency or going through small claims court. If such legal action is necessary, its costs will be included in the claim. In most collection situations, the only information I release regarding a patient’s treatment is his/her name, the nature of services provided, and the amount due.

CONTACTING ME. I am often not immediately available by telephone. While I am usually in my office between 8:00 a.m. and 4:00 p.m. Tuesday through Friday, it is not my policy to answer the phone when I am with a client. When I am unavailable, my telephone is answered by voice mail. I will make every effort to return your call on the same day you make it, with the exception of weekends and holidays. If you are difficult to reach, please inform me of some times when you will be available. If you are unable to reach me and feel that you can’t wait for me to return your call, contact your family physician or the nearest emergency room and ask for the mental health professional on call. If I will be unavailable for an extended time, I will provide you with the name of a colleague to contact, if necessary.

PROFESSIONAL RECORDS. The laws and standards of my profession require that I keep treatment records. You are entitled to receive a copy of your records, or I can prepare a summary for you instead. Because these are professional records, they can be misinterpreted and/or upsetting to untrained readers. If you wish to see your records, I recommend that you review them in my presence so that we can discuss the contents. Patients will be charged an appropriate fee for any professional time spent in responding to information requests. If you are under eighteen years of age, please be aware that the law may provide your parents the right to examine your treatment records.

SOCIAL MEDIA AND TELECOMMUNICATION

Due to the importance of your confidentiality and the importance of minimizing dual relationships, I do not accept friend or contact requests from current or former clients on any social networking site (Facebook, LinkedIn, etc). I believe that adding clients as friends or contacts on these sites can compromise your confidentiality and our respective privacy. It may also blur the boundaries of our therapeutic relationship. If you have questions about this, please bring them up when we meet and we can talk more about it.

Jessica Vincenzo, LCSW, OSW-C



-What you seek is seeking you-

ELECTRONIC COMMUNICATION

I cannot ensure the confidentiality of any form of communication through electronic media, including text messages. If you prefer to communicate via email or text messaging for issues regarding scheduling or cancellations, I will do so. While I may try to return messages in a timely manner, I cannot guarantee immediate response and request that you do not use these methods of communication to discuss therapeutic content and/or request assistance for emergencies.

Services by electronic means, including but not limited to telephone communication, the Internet, facsimile machines, and e-mail is considered telemedicine by the State of California. Under the California Telemedicine Act of 1996, telemedicine is broadly defined as the use of information technology to deliver medical services and information from one location to another. If you and your therapist chose to use information technology for some or all of your treatment, you need to understand that:

- (1) You retain the option to withhold or withdraw consent at any time without affecting the right to future care or treatment or risking the loss or withdrawal of any program benefits to which you would otherwise be entitled.
- (2) All existing confidentiality protections are equally applicable.
- (3) Your access to all medical information transmitted during a telemedicine consultation is guaranteed, and copies of this information are available for a reasonable fee.
- (4) Dissemination of any of your identifiable images or information from the telemedicine interaction to researchers or other entities shall not occur without your consent.
- (5) There are potential risks, consequences, and benefits of telemedicine. Potential benefits include, but are not limited to improved communication capabilities, providing convenient access to up-to-date information, consultations, support, reduced costs, improved quality, change in the conditions of practice, improved access to therapy, better continuity of care, and reduction of lost work time and travel costs.

Effective therapy is often facilitated when the therapist gathers within a session or a series of sessions, a multitude of observations, information, and experiences about the client. Therapists may make clinical assessments, diagnosis, and interventions based not only on direct verbal or auditory communications, written reports, and third person consultations, but also from direct visual and olfactory observations, information, and experiences. When using information technology in therapy services, potential risks include, but are not limited to the therapist's inability to make visual and olfactory observations of clinically or therapeutically potentially relevant issues such as: your physical condition including deformities, apparent height and weight, body type, attractiveness relative to social and cultural norms or standards, gait and motor coordination, posture, work speed, any noteworthy mannerism or gestures, physical or medical conditions including bruises or injuries, basic grooming and hygiene including appropriateness of dress, eye contact (including any changes in the previously listed issues), sex, chronological and apparent age, ethnicity, facial and body language, and congruence of language and facial or bodily expression. Potential consequences thus include the therapist not being aware of what he or she would consider important information, that you may not recognize as significant to present verbally the therapist.

TERMINATION

Ending relationships can be difficult. Therefore, it is important to have a termination process in order to achieve some closure. The appropriate length of the termination depends on the length and intensity of the treatment. I may terminate treatment after appropriate discussion with you and a termination process if I determine that the psychotherapy is not being effectively used or if you are in default on payment. I will not terminate the therapeutic relationship without first discussing and exploring the reasons and purpose of terminating. If therapy is terminated for any reason or you request another therapist, I will provide you with a list of qualified psychotherapists to treat you. You may also choose someone on your own or from another referral source.

Should you fail to schedule an appointment for three consecutive weeks, unless other arrangements have been made in advance, for legal and ethical reasons, I must consider the professional relationship discontinued.

LEGAL/COURT TESTIMONY AND RECORDS. It is important for you to know that I will not be a party to any legal proceedings against current or former clients. My goal is to support my clients to achieve therapy goals – not to address legal issues that require an adversarial approach. Clients entering treatment are agreeing to not involve me in adversarial legal/court proceedings or attempt to obtain records of treatment for legal/court proceedings when relationship, marital or family therapy has been unsuccessful at resolving disputes. This prevents misuse of your treatment for legal objectives.

Jessica Vincenzo, LCSW, OSW-C



-What you seek is seeking you-

Thank you for participating in this journey of exploration with me. Your signature below indicates that you have read the information in this document, you understand it, and agree to abide by its terms.

Signature _____

Date _____