

Christina Z. Atti, Psy.D.

Licensed Psychologist

CLINICAL SERVICES- POLICIES AND PROCEDURES

Welcome to my practice! This document contains important information about my professional services and business policies. I am happy to answer any questions, comments, and concerns that you might have so please feel free to share any of these as they arise.

THERAPY

Therapy has both benefits and risks. Risks sometimes include experiencing uncomfortable feelings or discussing unpleasant aspects of your life. However, research has proven that therapy has benefits for people who undertake it. Therapy often leads to a significant reduction in feelings of distress, improvements in relationships, and solutions to specific problems. It is important to note that there are no guarantees for any individual; individuals who put forth honest effort (and practice the skills learned in session in their everyday lives) typically have a positive correlation with outcomes.

Your first few sessions will involve an evaluation of your needs. By the end of the evaluation, Dr. Atti will be able to offer you some initial impressions of what your work will include, and an initial treatment plan to follow. The frequency in which you can expect to meet will vary from person to person. Sessions will take place weekly, and typically are scheduled for one, 45 to 50-minute session, though other arrangements can be discussed and agreed upon. A 1-hour therapy appointment session equals 45 to 50-minutes in duration. Extended sessions (75-minutes) are also available.

RATES and INSURANCE

The fees per therapeutic hour are as follows:

For Individuals:

Initial Evaluation- Individual Session - (50- Minutes): \$250.00

Individual Session – (45 to 50-Minutes): \$225.00

For Couples or Families:

Initial Evaluation- Couple or Family Session - (50- Minutes): \$275.00

Couple or Family Session - (45 to 50-Minutes): \$250.00

Reduced fee services are available on a limited basis; please speak to Dr. Atti to discuss your needs.

Dr. Atti does not take insurance and operates as an “out of network” provider. The type of therapy that Dr. Atti offers is unique, and thus, quite time-consuming. The number of hours required to work with insurance companies could be spent on more valuable endeavors, such as time with you and developing your individual treatment plan based on your personal goals. In addition, many insurance providers require that detailed information about you be provided to them in order to get more sessions authorized, and your treatment may be dictated by your managed care representative. Further, it is possible that your information, including diagnoses, could go into a central computer network which can be accessed by any physician, college, law enforcement agency, military group, insurance company, etc. and can be used

against you (or your children). Dr. Atti does not agree with these practices, believes they violate ethical principles and does not foster a therapeutic environment.

Therefore, Dr. Atti does not accept health insurance. Some insurance companies may reimburse you for a portion of the session fees; speak to your insurance company directly to find out. To make this process easier, Dr. Atti can provide you with a billing statement (upon request) that you can provide to your insurance carrier.

OTHER PROFESSIONAL SERVICES

In addition to weekly appointments, other professional services that you may require will be charged your hourly fee on a prorated basis. These services may include (but are not limited to): letter writing, telephone conversations which last longer than 10 minutes, attendance at meetings or consultations with other professionals that you have authorized, preparation of records or treatment summaries, or the time required to perform any other service which you may request. If you become involved in litigation in which Dr. Atti is required to participate, you will be expected to pay for the professional time required, even if compelled to testify by another party. Due to the complexity and time-consuming nature of legal involvement, Dr. Atti charges \$500.00 per hour for her attendance at any legal proceeding (this will also extend to include any document preparation and travel time to and from the legal proceeding).

BILLING and PAYMENTS

You will be expected to pay for each therapy session at the time it is held. Dr. Atti accepts cash, checks, and credit cards (Visa, Mastercard, Discover or American Express). Payment schedules for other professional services will be agreed to at the time these services are requested. In circumstances of unusual financial hardship, Dr. Atti will be able to negotiate a fee adjustment or payment plan. When paying with a credit card, note that your confidentiality can become compromised as Dr. Atti uses a merchant processing company to obtain payment. Periodically, Dr. Atti may need adjust her fee schedule; she will discuss this with you if/when this is done.

If your account is more than 30 days in arrears and suitable arrangements for payment have not been agreed to, Dr. Atti has the option of using legal means to secure payment, including collection agencies or small claims court. If such legal action is necessary, the costs of bringing that proceeding will be included in the claim. In such cases, the only information that would be released is the client's name, the general nature of the services provided, and the amount due.

CANCELLED, LATE, AND MISSED SESSIONS

Please understand that your scheduled session time is reserved specifically for you. In the event that you have to cancel and reschedule your appointment, advanced notice is appreciated so that others who may be in need of timely service may be able to use available appointment times. If you do not attend your scheduled therapy appointment and have not notified Dr. Atti at least 24 hours in advance, you will be expected to pay the full cost of the session unless in a documented emergency situation. Phone messages and text messages can be left 24 hours a day. In the event that you arrive late to a therapy appointment, your time will continue to end at the time at which it was scheduled to end.

CONTACTING YOUR PSYCHOLOGIST

Dr. Atti is often not immediately available by telephone. You may leave messages for her on the general practice phone at (945) 320-0173. When Dr. Atti is unavailable, her telephone is answered by voice mail that is monitored frequently. Dr. Atti will make every effort to return your call on the same day you make it with exception of weekends, holidays, and noted absences. Note: Dr. Atti may not be available in moments of crisis or emotional duress.

EMERGENCIES

If you cannot reach Dr. Atti by phone and feel that you cannot wait for a return phone call, you should call the emergency room at the nearest hospital and ask for the psychologist or psychiatrist on-call. In an emergency, you can also arrange to be taken directly to the emergency room or call 911 for assistance. The Suicide Prevention Lifeline is 1-800-273-TALK (8255). If Dr. Atti is unavailable for an extended time, she will provide you with the name of a trusted colleague whom you may contact if necessary.

MINORS

Because privacy in therapy is often crucial to successful progress, and parental involvement is also essential, it is usually Dr. Atti's policy to request an agreement with minors and their parents about access to information. This agreement provides that during treatment, Dr. Atti will provide parents with only general information about the progress of treatment, and the client's attendance at scheduled sessions. Other communications are kept to a minimum unless the minor is in danger to self or others, in which case Dr. Atti will notify the parent(s) of these concerns. Before giving parents any information, it will be discussed with the minor, if possible, and any objections will be handled to the best of Dr. Atti's ability.

PROFESSIONAL RECORDS

The laws and standards of the profession of a Psychologist require that Protected Health Information about you be kept in your Clinical Record. Except in unusual circumstances, you may receive a treatment summary of your Clinical Record, if you request it in writing. Due to the professional nature of these records, they can be misinterpreted by untrained readers. For this reason, it is recommended that you initially discuss your concerns with Dr. Atti, or request her to speak to another mental health professional to provide a clear understanding of your treatment with less likelihood for written misinterpretation. In most circumstances, there is an administrative and copy fee of \$50.00 for your clinical summary (prorated from your hourly fee, as aforementioned).

CONFIDENTIALITY and LIMITS

The law protects the privacy of all communications between a patient and a psychologist. In most situations, information about your treatment can only be released to others if you sign a written Authorization form that meets certain legal requirements. The Health Insurance Portability and Accountability Act (HIPAA) provides you with several new or expanded rights with regard to your Clinical Records and disclosures of protected health information. These rights are described in the "Notice of Policies and Practices to Protect the Privacy of Your Information" which you have received separately.

There are other situations that require only that you provide written, advance consent. Your signature on this contract provides consent for those activities, as follows: Dr. Atti may occasionally find it helpful to consult other health and mental health professionals about a case. During a consultation, Dr. Atti will make every effort to avoid revealing the identity of a client. The other professionals are also legally bound to keep the information confidential. If you don't object, Dr. Atti will not tell you about these consultations unless she finds it important to your work together. Notes about all consultations will be kept in your Clinical Record.

EMAIL COMMUNICATIONS

Clients authorize Dr. Atti to communicate with them by e-mail regarding their personal health information (as such term is defined by the HIPAA of 1996 and its implementing regulations) (personal health information is known as “PHI”) at the clients e-mail address shown on the front page of initial contact form. The client acknowledges that e-mail is not a secure medium for sending or receiving PHI and, in particular, if they send or receive email through an employer’s e-mail system, the employer has the right to review any such communication. Although Dr. Atti will make reasonable efforts to keep e-mail communications among the client, practice (and her employees, agents, and representatives) confidential and secure, Dr. Atti cannot assure or guaranty the confidentiality of e-mail communications. In the discretion of Dr. Atti, e-mail communications may be made part of the client’s permanent medical record. Lastly, client will not use e-mail for communications regarding emergencies, time-sensitive issues, or for communication regarding other sensitive information.

SOCIAL MEDIA POLICY

The following outlines Dr. Atti’s policies related to use of Social Media. Understanding how Dr. Atti conducts herself on the Internet, as a mental health professional, is important so that you can come to expect how she would respond to various interactions that may occur between you, the client, and her on the Internet.

(1) Dr. Atti does not accept friend or contact requests from current or former clients on any social networking site (e.g., Facebook, LinkedIn, Instagram, etc). Dr. Atti believes that adding clients as friends or contacts on these sites can compromise your confidentiality and our respective privacy.

(2) Dr. Atti keeps a professional Facebook Page to allow people to read and share professional resources and information. All of the information on this Facebook Page is viewable to the public so it is important that clients be aware that by “liking” or “following” Dr. Atti’s page, confidentiality becomes more likely to be compromised, and thus Dr. Atti recommends strongly against doing so.

(3) It is NOT a regular part of Dr. Atti’s practice to search for clients on Google or Facebook or other search engines. Extremely rare exceptions *may* be made during times of crisis. If Dr. Atti has a reason to suspect that you are in danger and have not been in touch with her via usual means (e.g., coming to appointments, phone, or e-mail) there *might* be an instance in which using a search engine (to find you, find someone close to you, or to check on your recent status updates) becomes necessary as part of ensuring your welfare. These are unusual situations and if Dr. Atti ever resorts to such means, she will fully document it and discuss it with you upon your next meeting.

(4) You may find Dr. Atti’s psychology practice on sites such as Google, Yelp, Healthgrades, Bing, or other places which list businesses. Some of these sites include forums in which users rate their providers and add reviews. Dr. Atti will never request a testimonial, rating, or endorsement from a client. Of course, you have a right to express yourself on any site you wish. But due to confidentiality, Dr. Atti cannot respond to any review on any of these sites, whether it is positive or negative. Dr. Atti urges you to take your own privacy as seriously as her commitment to maintaining confidentiality. You should be aware that if you are using these sites to communicate indirectly with Dr. Atti about your feelings of your work together, it is a good possibility she will never see it. If you do choose to write something on a business review site, keep in mind that you may be sharing personally revealing information in a public forum. Dr. Atti encourages you to create a pseudonym that is not linked to your regular email address or friend networks for your own privacy and protection.

TELE-THERAPY/TELE-MEDICINE

In the event that a client expresses interest in receiving therapy using telehealth technologies, there are some things that should be noted. “Telemedicine” includes the practice of health care delivery, diagnosis, consultation, treatment, transfer of medical data, and education using interactive audio, video, or data communications. Telemedicine involves the communication of my medical/mental health information, both orally and visually, to health care practitioners in Florida or outside of the state. It is important to both note, and understand the following: (1) A client has the right to withhold or withdraw consent at any time without affecting their right to future care or treatment nor risking the loss or withdrawal of any program benefits to which they would otherwise be entitled; (2) The laws that protect your confidentiality of your medical information also apply to telemedicine. As such, understand that the information disclosed to Dr. Atti during the course of therapy have the same limits of confidentiality as discussed in the Informed Consent Form; (3) There are risks and consequences from telemedicine, including, but not limited to, the possibility, despite reasonable efforts on the part of Dr. Atti that the transmission of your medical information could be interrupted by unauthorized persons; and/or electronic storage of your medical information could be accessed by unauthorized persons. In addition, telemedicine based services and care may not be as complete as face-to-face services and thus, if Dr. Atti believes you would be better served by another form of psychological services, you will be referred to a practitioner who can provide such services in your area; (4) A client may benefit from telemedicine, but results cannot be guaranteed or assured; and (5) Certain situations, including emergencies and crises, are inappropriate for audio/video/computer based psychotherapy services. In the event of a crisis or emergency, client agrees to immediately call 9-1-1 or seek help from a hospital or crisis oriented health care facility in their immediate area.

QUESTIONS, COMMENTS, or CONCERNS

If you have any questions regarding these policies and procedures please do not hesitate to speak with Dr. Atti regarding those issues. You will be notified of any changes to these policies in writing.

Client Name (PRINT), and SIGN

Date

Parent Name (if client is a minor), and SIGNATURE

Date