

**WELCOME TO LANIER COUNSELING SERVICES!**

*(Please indicate your agreement by providing your initials for each section. Thank you.)*

- \_\_\_\_\_ Please take a few moments to read and complete the following forms. We want to thank you for choosing our practice. Together we will work to identify and implement solutions to the problems that brought you here. All sessions are 50 minutes in length. In the first session, we will discuss the presenting problem through mutual questions and answers. We will identify possible goals and discuss follow-up sessions. We will review any questions you have about your rights and responsibilities as a client and clarify financial arrangements. Please feel free to ask any questions at any time in our work together.
  
- \_\_\_\_\_ Therapy is a personal experience. Although there are no guarantees, potential benefits include not only a greater ability to handle or cope with problems and interpersonal relationships but also a better understanding of personal goals and values. You may trust that what is discussed in therapy is confidential. Exceptions to confidentiality are as follows: (1) disclosure of a serious intention or plan to harm another person. All therapists are required by law to warn the intended victim and report it to the legal authorities; (2) disclosure of a serious plan or recent attempt of suicide. All therapists are required to notify the family of the client and/or legal authorities; (3) If a court of law issues a legitimate subpoena. (4) Disclosure of any information suggesting abuse/neglect of a child or vulnerable adult. All therapists are required to notify the legal authorities; (5) If a minor discloses a plan to run away, family will be informed as well. All other communications require your authorization.
  
- \_\_\_\_\_ If you use a third party payment, a diagnosis is given to the insurance company for reimbursement. The insurance company also has the right to review your records upon request. We have no control over how your insurance company uses or releases your diagnosis or other information.
  
- \_\_\_\_\_ Our goal is to meet only as often as needed to resolve the problem. There is no charge for brief phone calls. We do not take phone calls between sessions, except for emergencies. We DO NOT have 24-hour coverage. Therefore, after hours and weekend emergencies necessitate the use of the local emergency rooms or psychiatric hospitals.
  
- \_\_\_\_\_ 24 Hour Advance Notice is required and 48-Hour notice is appreciated to cancel or reschedule appointments. You are responsible for paying for missed appointments. Please leave a message on our confidential answering machine (available 24-hours a day) if you are unable to get in touch with us directly. You will be charged in full if 24-hour advance notice is not given.
  
- \_\_\_\_\_ We bill your insurance as a courtesy to you and accept co-payment while awaiting reimbursement. Any insurance claim not paid within 30 days will be billed to you. All returned checks will be charged a \$20 fee and need to be paid within 7 days of return from the bank.
  
- \_\_\_\_\_ Lanier Counseling Services focuses on therapeutic issues. We believe in most cases that our involvement in the legal system is counterproductive to therapy. Furthermore, our therapists are not trained to complete custody evaluations. However, if at any point a subpoena is received, our fees are \$275.00 an hour for all legal involvement related to the subpoena including any preparation, phone calls and transportation.
  
- \_\_\_\_\_ I acknowledge reading a copy of the Notice of Privacy Practices (HIPPA) for Lanier Counseling Services.

**Printed Name:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Signature:** \_\_\_\_\_