

WELCOME TO THE SAMARITAN COUNSELING CENTER

The Samaritan Counseling Center is an inter-denominational expression of God's love through counseling and education. Your therapist is **Melinda McKeague**, LMHC, LCPC, who is licensed in Indiana and Illinois. Melinda is a trained Dialectical Behavior Therapist and has done extensive work with chronic mental illness. When partnering with individuals, she is able to use such therapies as cognitive-behavioral, client-centered or a focusing approach.

Please take a moment to read the following important information about your counseling

FEES, PAYMENT AND INSURANCE

The standard fee is \$135 per initial assessment session for individual, couple and family therapy and \$100 for all subsequent sessions. The fee may be adjusted based on personal financial need. Contact your therapist if your financial situation changes while in therapy. Payment is expected at the time of service unless special arrangements are made with your therapist. Please make checks out to the **Samaritan Counseling Center**.

Your medical insurance may cover therapy. Benefits vary greatly for reimbursement, eligible providers and co-payments. Your carrier may require pre-certification and/or have a deductible amount that must be met before reimbursement. Co-payment is expected at time of service with the balance billed to your insurance carrier. You are responsible for any balance not covered by the carrier. Samaritan Counseling Center determines benefits and bills your insurance.

APPOINTMENTS AND CANCELLATIONS

Regular appointments are essential to an effective therapy process. The normal length of each session is 50 minutes. Appointments are scheduled on an ongoing basis with your therapist. If you need to cancel an appointment then please contact the Center at (219) 923-8110 at least **24 hours in advance**. You will be billed for missed appointments and late cancellations at the normal fee for therapy unless there are mitigating circumstances.

EMERGENCY COVERAGE

The Samaritan Center does not provide seven day, 24 hour immediate response for emergencies. If you are in serious crisis needing immediate attention then please seek an evaluation at the nearest hospital emergency room or local psychiatric unit. If you have an urgent need to talk to your therapist after normal business hours (weekends or after 4:30 PM weekdays), call 923-8110. One of our therapists monitors crisis calls weekends and every evening until 9 P.M. When voice mail answers, ignore the number options and leave your name, phone number and name of your therapist after the beep. The On Call Therapist will contact your therapist, if she/he is available, to return your call promptly. If your therapist is unavailable, the On Call Therapist will call you and advise you that your own therapist is not available, and offer assistance.

NOTICE OF THE PRIVACY PRACTICES OF THE SAMARITAN COUNSELING CENTER

The Samaritan Counseling Center has a professional and ethical responsibility to provide strict confidentiality and a legal responsibility under the laws of the United States and the State of Indiana to keep your health information private. Since the Center takes this responsibility very seriously, we have thorough and strict guidelines for protecting your privacy. Giving you this notice about our privacy practices is part of this responsibility. Please review this notice carefully and feel free to ask your therapist about anything that you might not understand.

Your therapist usually will not disclose any information about you or your case to anyone outside SCC without written authorization. All authorizations expire in 180 days and you may revoke it at any time. The ethical and/or legal exceptions to strict confidentiality are:

- Your therapist is mandated by law to report known or suspected cases of **abuse or neglect to children, the elderly or the handicapped**. The law also required that your therapist **warn the potential victims of violence or homicide**.
- Your therapist will take steps to ensure your safety in **suicidal** or other **emergency situations**. This may include contacting a family member, the police or other person who can respond to the emergency. In so doing, we will only disclose the aspects of your health information that are necessary to respond to the emergency.
- Your therapist may be **compelled to testify** or **to release your records by court order**.
- Your therapist may be required to release your health information by federal, state or local laws to a person such as a judge or probation officer.

Within the agency, your health information is disclosed in very limited ways including:

- Your therapist will provide dates of service, insurance information and diagnosis to office personnel for the purpose of billing and keeping required statistical data.
- Your therapist may consult with their clinical supervisor and/or our consulting psychiatrist about your case. Consultation increases the quality of treatment by providing fresh insights, effective treatment strategies and guidance in times of crisis.
- Your therapist will provide limited information to the On Call Therapist in times of crisis so that the Center can respond quickly and effectively to meet your needs.
- Your record may be reviewed anonymously for the purpose of evaluating clinical staff, quality control and/or to meet accreditation standards.

Every staff member at the Samaritan Counseling Center is trained to provide confidentiality for our clients.

CLIENT RECORDS

Your therapist is required to keep all documents related to your therapy in a client record. The record contains progress notes to help your therapist remember key points from each session, an initial assessment with a treatment plan and a treatment summary following the termination of therapy. Client records are kept in a secure area and destroyed after seven years.

CLIENT RIGHTS

1. With limited exceptions, you can make a written request to inspect your client record with your therapist. You may request alternative means or location. This request should be addressed to the HIPAA Compliance Officer. If you participated in couple therapy both parties must authorize in writing this review of the clinical record.
2. You can ask us for a photocopy of the information in your client record. There is a \$10.00 charge for this service.
3. After reviewing the record, you may make a written amendment to this information. Your amendment will be included in the record.
4. You can request that we place additional restrictions on the ways that we use or disclose your health information. For instance, if you have a personal relationship with one of our staff therapists then you may request that person not be involved in the supervision of your case. This request will be honored except when it violates our legal and/or ethical responsibilities delineated above. Please list any requests in the space below:

CELL PHONES

Cell phones are not considered completely secure by the new federal guidelines for protecting health information (HIPAA). As a result, it is your decision whether to communicate with your therapist through the use of a cell phone. Whenever you ask for a call from a staff member at the Samaritan Counseling Center to your cell phone, the appropriate staff person will honor your request.

The use of cell phones by our staff therapists has improved greatly our ability to respond promptly to your calls particularly in crisis situations. At your request, however, we will refrain from all use of cell phones in contacting you. Your wishes regarding the use of cell phones will be noted on the Informed Consent.

Please direct any written requests about these regulations to our HIPAA Compliance Officer at the following address:

Richard Bowers
Executive Director
The Samaritan Counseling Center
8955 Columbia Avenue
Munster, IN 46321

Please sign below that you have read this Notice of Privacy Practices:

Client's Signature

Staff Therapist

Date

TERMINATION OF THERAPY

You may terminate therapy at any time. Should you decide to end your counseling, we recommend a final session with your therapist rather than terminating through cancellations, phone or mail. This affords you the opportunity to gain closure in a positive manner.

This notice takes effect on April 14, 2003. Any changes in this notice or in the HIPAA regulations will be provided to you.