8727 S. PRIEST DR. SUITE 101 TEMPE, AZ 85284

### Welcome to my practice

I know the changes you are going through began long before you came to see me. Thank you for inviting me to join you.

Psychotherapy has benefits and risks. Risks may include experiencing uncomfortable feelings like sadness or loneliness. You may recall feelings like fear or anger as you remember aspects of your personal story. Still, psychotherapy has been shown to have significant benefits such as reducing feelings of distress, improved relationships and quality of life and the resolution of specific problems.

Following an assessment period, I will be able to discuss with you what I believe our work together will include. If you decide to continue, you should evaluate the recommendations along with your own opinion of whether I am the person with whom you feel comfortable working.

Please read the following information about the time we will spend together.

### **About My Practice**

Stephanie Withrow is the owner of Withrow Family Therapy, PLLC and is licensed with the State of Arizona Board of Behavioral Health Examiners to practice independently as a Master's Level Licensed Professional Counselor since 1997.

Withrow Family Therapy, PLLC shares this office space with several other therapists, but Withrow Family Therapy, PLLC is separate and independent from them.

On occasion Withrow Family Therapy, PLLC may have an associate therapist working in the office and to whom Stephanie Withrow is providing clinical supervision. If you are seeing an associate, you will receive additional detailed forms that will describe what that involves.

# **Telephone and Email**

- I schedule my appointments personally. You may reach my voice mail at the number I provided when we set up our first appointment.
- Please leave your name and return phone number even if you think I already have it. I will return your call as quickly as possible, within 2 business days.
- Phone calls (other than our initial conversation) over 10 minutes will be charged at the regular hourly rate in 15 minute increments.
- I will correspond about our schedule through email, but to protect your confidentiality I will not discuss clinical issues by email.

#### **Social Media**

Please note that any social media apps you use may seek to connect you with me or with other visitors to this office, through a "people you may know" feature. I have no control over apps that may intrude on the privacy of your treatment in this way. If you would like to minimize the risk of others becoming aware of your connection to me or this office, please make use of the privacy controls available on your phone. Turning off a social media app's ability to know your location and refusing it access to your email account and the contacts and history in your phone, protects your privacy and confidentiality.

• I do not accept friend requests or similar connections with clients or their family members or friends on social media. This is to protect your confidentiality and privacy. Social media is not a way to contact me.

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- If you would like me to review your or your child's social media interactions as part of our therapeutic work, please print what you would like me to review and bring it with you to session.
- Even if your or your child's social media accounts are public, I will not examine them without your specific consent and direction.

### **Emergencies**

I do not provide emergency mental health or crisis services. If you have such an emergency, please call 911 or use the free crisis services in Maricopa county by dialing 602-222-9444 or 480-784-1500. Telephone counselors will talk with you and attempt to help you resolve the emergency over the phone. In cases of extreme distress or that involve suicidal feelings or actions, they are authorized to dispatch a crisis team. The teams are headed by a master's level mental health clinician. They will come to your home, or wherever you are to help you. There is no fee for this service and it is confidential. They, however, cannot reach me.

## **Working with Couples**

- Information revealed in marital therapy is protected by privileged communication in Arizona. Therefore, what one spouse says during a therapy session to or about the other spouse may not be revealed to anyone other than the other spouse without written permission from BOTH of you.
- When a family is confronted by parental separation or divorce, it is very hard on everyone. It is important that both spouses feel safe to speak openly and honestly, without fear that the information will be used against them. In order to provide a safe environment for couples work it is important that you agree not to call me as a witness or to attempt to subpoena records in the event of a divorce. Though a judge may overrule this agreement and issue a court order for information, your signature(s) below reflect your commitment to this matter.

#### Working with Children

I work with children as a Treating Therapist only. I do not provide evaluation, testing, or expert testimony. I will be happy, however, to refer you to qualified professionals who offer these services if I think it would be helpful or if you request it.

- As a parent, you have the right to information discussed in therapy sessions with a minor child. However, it is also important that your child know this is a safe environment where they can talk to me about anything. Therefore, I may ask that you allow for a time, a certain amount of privacy between your child and me. My commitment to you and your child is that I will inform you immediately if information shared is dangerous. We will also discuss a treatment plan that will include the resolution of challenges your child has in sharing difficult information with you.
- When a family is confronted by parental separation or divorce, it is very hard on everyone. It is important that children feel safe to speak openly and honestly, without fear that the information will be used against them. In order to provide a safe environment for children to work it is important that you agree not to call me as a witness or to attempt to subpoena records in the event of a divorce or custody negotiation. Though a judge may overrule this agreement and issue a court order for information, your signature(s) below reflect your commitment to this matter.

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### **Professional Fee Agreement and Health Insurance**

The fee for in-office or Telehealth psychotherapy services with Stephanie Withrow is \$185 per 50 minute session. The fee to see a supervised therapist is \$150/50 minute session. Groups are \$50 for 1.5 hours. Payment is due at the conclusion of each visit. If you need to make special arrangements regarding the payment of your bill, please talk to me directly.

- You will be asked to provide a valid credit card for the sole purpose of collecting unpaid fees.
- You may have out-of-network benefits that allow you to be reimbursed a certain percentage of the costs you incur for therapy. I am happy to provide you with paperwork that you can submit to your insurance company. Whether or not you are reimbursed is strictly between you and your insurance company.
- When considering the use of your insurance please be aware that, at a minimum I am required to give the insurance company a psychiatric diagnosis. This may result in your being denied in the future on application for disability, life or other health insurance. Furthermore, I cannot guarantee your confidentiality. I may be asked to provide them with detailed information as to your personal history, sexuality, HIV status, drug and alcohol use, problems, treatment goals, and/or progress. Failure to do so may mean denial of benefits. Once I provide this information it is out of my control and I cannot guarantee your confidentiality.
- In order to facilitate a smooth process with your health insurance company please call them prior to our first appointment to clarify your out-of-network benefits and whether they are subject to a deductible.

## **Missed or Forgotten Appointments**

Our scheduled appointment is a commitment by both of us – a commitment to spend a period of time working together. I do not schedule any other appointments during this time as you have actually purchased the time. Therefore, unless you cancel an appointment twenty-four (24) hours in advance you will be charged the regular hourly fee for the session. Insurance companies do not reimburse a missed appointment fee.

#### **Confidentiality and Protected Health Information**

Your privacy is important. Due to the complicated nature of federal and state laws regarding your protected health information, a HIPPA Notice of Privacy Practices has been created and will be made available to you at our first appointment. Your signature on this agreement indicates you have read, to your satisfaction the HIPAA Notices of Privacy Practices. You are entitled to a copy at your request.

The Counseling Code of Ethics and the laws of the State of Arizona require that conversations you have with a counselor will be held in the strictest confidence. You may be assured that I will not release any information about your therapy without your written permission. The following circumstances are exceptions:

- I have reason to believe you may harm yourself or another person.
- Child abuse or neglect is suspected.

Please also be aware of the following situations where your confidentiality may be waived:

You are involved in a court matter and a report is ordered by the court.

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- You choose to use your out-of-network health insurance benefits. Your insurance company has a right to access your records for the purpose of verifying that services were delivered as billed.
- There may be times when I discuss your case with another therapist to insure that I am providing the highest quality care. No identifying information about you will be shared.

## **Secure Storage, Transfer, and Access to Records**

- You will be notified in writing in advance if I close my practice.
- You will receive a contact number and procedure for accessing your records.
- All records will be stored in a secured storage area.
- I will respond within two (2) weeks to a request for copies of or access to your records.
- All unclaimed records will be destroyed after a specified period of time.