



## Disclosure and Informed Consent

### Introduction

This document is intended to provide important information to you regarding your treatment. Please read this entire document carefully and be sure to ask me any questions that you have regarding this at anytime during your treatment. Psychotherapy is a relationship between people that works in part because of clearly defined rights and responsibilities held by each person. As a client in therapy, you have certain rights and responsibilities that are important for you to understand. There are also legal limitations to these rights that you should be aware of.

### Information about Sarah A. Gilbert, LCSW and Transitions Therapy, LLC.

Sarah A. Gilbert is a Licensed Clinical Social Worker, licensed to practice in the state of Connecticut. Transitions Therapy LLC is an individual therapy practice owned and operated by Sarah A. Gilbert, LCSW. Although Sarah A. Gilbert may share office space with other therapists, Sarah A. Gilbert is solely responsible for managing her client's cases, record storage, liability insurance, ongoing training, and licensing. If you have questions about Sarah's professional background, experience, education, or therapeutic orientation, you are free to ask at any time during your treatment.

Appointments: Initial assessments will be 60 minutes in duration. Subsequent therapy appointments will ordinarily be between 45 and 55 minutes in duration. Typically, sessions are scheduled on a weekly basis, though they may be scheduled less frequently depending on your needs and availability. The time scheduled for your therapy session is assigned to you and you alone. Therefore, **if you need to cancel or reschedule a therapy appointment, you are asked to provide at least 24 hours' notice.** Additionally, you are responsible for coming to your therapy session on time; if you arrive late, your appointment will still need to end at the originally scheduled time.

Attendance: Your consistent attendance in therapy greatly contributes to a successful outcome. If you miss a session without cancelling, or cancel with less than 24 hours' notice, you will be subject to a cancellation/missed appointment fee of \$50 unless we both agree that you were unable to attend due to circumstances beyond your control (void where prohibited). Please note this fee is not covered by insurance; you are responsible for this fee. Additionally, if you are a no show or late cancel (within 24 hours) for 2 sessions within a 60 day period, you will likely be discharged from services with Transitions Therapy, LLC. If at any point in your treatment, it becomes apparent that consistent attendance in therapy is a concern, you or your therapist can initiate a discussion about this in order to best address this issue.

Confidentiality (please refer to Notice of Privacy Practices for further details): Transitions Therapy, LLC, in compliance with federal and state laws, will maintain the privacy of your PHI (protected health information). If you wish to have your PHI released to anyone outside of Transitions Therapy, LLC, you will be required to sign a release of information before such information can be released.

The following is a list of limitations to confidentiality of which you should be aware:

- Your therapist at Transitions Therapy, LLC may consult with other professional colleagues in order to provide you with the best care. In such instances, no identifying information about you, such as your name, shall be used.
- If you are assessed to pose an imminent danger to yourself, or others, Transitions Therapy, LLC is required by law to release pertinent information to the appropriate authorities and professionals. Transitions Therapy, LLC will disclose the least amount of identifiable information possible in such cases.
- In the event of reported or suspected abuse/neglect of children or vulnerable adults, Transitions Therapy, LLC is required by law to disclose this information to the appropriate authorities.

Confidentiality and Technology – special considerations: Some clients may choose to use various technologies as part of their treatment experience, including email, texts, voicemail, and fax. Email and voicemail services used by Transitions Therapy, LLC are done through secured services. However, as an added measure of protection, it is recommended that you limit email communication to appointment scheduling/cancellations. Any emails sent to Transitions Therapy, LLC will become part of your medical record. Transitions Therapy, LLC will take every precaution to safeguard your information, but cannot guarantee that unauthorized access to electronic communications could not occur.

Social Media Policy: Sarah A. Gilbert LCSW of Transitions Therapy LLC will not accept or respond to any friend/follow requests from current or former clients on any social networking sites (i.e Facebook, LinkedIn, Twitter, etc.). I believe that adding clients as friends or contacts on these sites can compromise your confidentiality and our respective privacy, as well as potentially blurring the boundaries of our professional, therapeutic relationship. If you have any questions about this, please feel free to discuss this during a session.

Record Keeping: Transitions Therapy LLC will keep records related to your treatment, including a treatment plan which outlines your goals for therapy. As previously indicated, your records will not be released to anyone without signed consent, except as listed in the limits to confidentiality section. Records will be kept for 7 years, and all client records are stored in a cloud based system with bank level encryption that is HIPAA certified, encrypted, and kept secure.

Payment: Co-pays and/or session fees are due at each session, and can be made by cash, check, or credit card (Visa, Mastercard, Discover, American Express). Outstanding balances cannot extend past 2 sessions. Reasonable efforts will be made to collect outstanding balances. If you refuse to pay your debt, Transitions Therapy, LLC reserves the right to use an attorney or collection agency to collect payment, after making reasonable efforts to inform you of your balance, and to collect payment from you directly.

Insurance: If you have a health insurance policy, it is likely that you have some mental health coverage. If possible, Transitions Therapy LLC will assist you with obtaining information pertaining to your coverage, however, **it is your responsibility to be informed of the scope of your coverage.** Further, it is your responsibility to inform Transitions Therapy, LLC of any changes to your insurance policy or coverage that occur while you are in treatment. You should also be aware that most insurance companies require you to authorize Transitions Therapy, LLC to provide them with protected health information such as diagnosis, dates of service, and possibly your treatment plan in order to secure payment. Many policies leave a percentage of the session fee to be covered by the patient; this amount due is to be

paid at the time of the session in full by cash, check, or credit card. In addition, some insurance companies also have a deductible, which is an out-of-pocket amount that must be paid by the patient before the insurance companies are willing to begin paying any amount for services.

In addition, if you plan to use your insurance, authorization from the insurance company may be required prior to your intake appointment before they will cover therapy sessions. If you did not obtain prior authorization and it is required, you will be responsible for full payment of the session fees that were not covered by the insurance due to the lack of authorization.

Contact information: Clients can contact Sarah A. Gilbert of Transitions Therapy, LLC via phone at 860-222-2529. As noted in this confidentiality section, please note that texts sent to this number must be limited to appointment scheduling or re-scheduling; if you need to discuss any other issues related to your treatment, you are to call Sarah at this number.

I am sometimes not immediately available by phone. I will do my best to return all calls on the same day they are received. If you are experiencing a behavioral health crisis, please call 911 or, if safely able to, get to your nearest hospital emergency room, rather than leaving a voicemail. This will help to ensure you get the treatment and support you need as quickly as possible.