

Phone: 844-MYMIND1 (844-696-4631)

Fax: (484) 577-3164

Email: support@mymindmatterscounseling.com
Website: www.mymindmatterscounseling.com
Address: 2209 Quarry Drive, A-10, Reading, PA 19609
Address: 1150 Glenlivet Drive, A-23, Allentown, PA 18106
Address: 1021 Centre Turnpike, Orwigsburg, PA 17961

PRACTICE POLICIES

APPOINTMENTS AND CANCELLATIONS

The standard meeting time for psychotherapy is approximately 50 minutes (37 minutes for a 45 minute session and 53 minutes for an hour session). It is up to you, however, to determine the length of time of your sessions. Requests to change the 50-minute session needs to be discussed with the therapist in order for time to be scheduled in advance.

Please remember to cancel or reschedule 24 hours in advance. You will be responsible for the entire fee if cancellation is less than 24 hours. Cancellations and rescheduled sessions will be subject to a full charge if NOT RECEIVED AT LEAST 24 HOURS IN ADVANCE. This is necessary because a time commitment is made to you and is held exclusively for you. If you are late for a session, you may lose some of that session time.

PAYMENTS

Charges are automatically applied to the credit card on file for the date of service. This includes any deductibles, co-insurances, and co-pays, or charges not covered by your insurance policy and may be charged when the Explanation of Benefits (EOB) is returned. A \$20.00 service charge will be charged for any checks returned for any reason for special handling.

TELEPHONE AND EMAIL ACCESSIBILITY

Preferable mode of communication is email. You may also call support at the main number. However, I am often not immediately available. I will attempt to return your email or call within 24 hours notice. If a true emergency situation arises, please call 911 or go to any local emergency room. Please note that face-to-face sessions are highly preferable to phone sessions. However, in the event that you are out of town, sick or need additional support, phone and/or telehealth sessions are available. Any phone call longer than 15 minutes may be charged as a session and may not be covered by insurance. Phone calls over 15 minutes will be charged \$25 for each increment of 15 minutes. Email chains may also be charged for time if they become excessive.

SOCIAL MEDIA AND TELECOMMUNICATION

Due to the importance of your confidentiality and the importance of minimizing dual relationships, I do not accept friend or contact requests from current or former clients on any social networking site (Facebook, LinkedIn, etc). I believe that adding clients as friends or contacts on these sites can compromise your confidentiality and our respective privacy. It may also blur the boundaries of our therapeutic relationship. If you have questions about this, please bring them up when we meet and we can talk more about it.

ELECTRONIC COMMUNICATION

I cannot ensure the confidentiality of any form of communication through electronic media, including text messages. If you prefer to communicate via email or text messaging for issues regarding scheduling or cancellations, I will do so. While I may try to return messages in a timely manner, I cannot guarantee immediate response and request that you do not use these methods of communication to discuss



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therapeutic content and/or request assistance for emergencies. I will return emails within 24 hours. If a true emergency situation arises, please call 911 or go to any local emergency room.

Services by electronic means, including but not limited to telephone communication, the internet, facsimile machines, and emails is considered telemedicine. Telemedicine is broadly defined as the use of information technology to deliver medical services and information from one location to another. If you and your therapist chose to use information technology for some or all of your treatmetn you need to understand that: 1) You retain the option to withhold or withdraw consent at any time without affecting the right to future care or treatment or risking the loss or withdrawal of any program benefits to which you would otherwise be entitled. 2) All existing confidentiality protections are equally applicable. 3) Your access to all medical information transmitted during a telemedicine consultation is guaranteed, and copies of this information are available for a reasonable fee. 4) Dissemination of any of your identifiable images or information from the telemedicine interaction to researchers or other entities shall not occur without your consent. 5) There are potential risks, consequences, and benefits of telemedicine. Potential benefits include, but are not limited to improved communication capabilities, providing convenient access to up-to-date information, consultations, support, reduced costs, improved quality, change in the conditions of practice, improved access to therapy, better continuity of care, and reduction of lost work time and travel costs. Therapists may make clinical assessments, diagnosis, and interventions based not only on direct verbal or auditory communications, written reports, and third person consultation, but also fro direct visual and olfactory observations, information and experiences. When using information technology in therapy services, potential risks include, but are not limited to the therapist's inability to make visual and olfactory observations of clinically or therapeutically potentially relevant issues such as: your physical condition including deformities, apparent height and weight, body type, attractiveness relative to social and cultural norms or standards, gait and motor coordination, posture, work speed, any noteworthy mannerism or gestures, physical or medical conditions including bruises or injuries, basic grooming and hygiene including appropriateness of dress, eye contact (including any changes in the previously listed issues), sex, chronological and apparent age, ethnicity, facial and body language, and congruence of language and facial or bodily expression. Potential consequences thus include the therapist not being aware of what he or she would consider important information, that you may not recognize as significant to present verbally the therapist.

MINORS COACHING COUNSELING & PSYCHOLOGICAL ASSOCIATES

If you are a minor (under age 14), your parents may be legally entitled to some information about your therapy. I will discuss with you and your parents what information is appropriate for them to receive and which issues are more appropriately kept confidential.

TERMINATION

Ending relationships can be difficult. Therefore, it is important to have a termination process in order to achieve some closure. The appropriate length of the termination depends on the length and intensity of the treatment. I may terminate treatment after appropriate discussion with you and a termination process if I determine that the psychotherapy is not being effectively used or if you are in default on payment. I will not terminate the therapeutic relationship without first discussing and exploring the reasons and purpose of terminating. If therapy is terminated for any reason or you request another



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therapist, I will provide you with a list of qualified psychotherapists to treat you. You may also choose someone on your own or from another referral source.

Should you fail to schedule an appointment for 3 consecutive weeks, unless other arrangements have been made in advance, for legal and ethical reasons, I must consider the professional relationship discontinued.

CONFLICTS

We work hard to ensure that you have a positive experience. However, if a conflict occurs, it is agreed that any disputes shall be directly between the two parties. If these negotiations are not satisfactory, then the parties agree to mediate any differences. You may do this by notifying support@mymindmatterscounseling.com if you are unsatisfied with any services.

BY SIGNING BELOW I AM AGREEING THAT I HAVE READ, UNDERSTOOD AND AGREE TO THE ITEMS CONTAINED IN THIS DOCUMENT.

Signature:	/ 	10	Date:	