

## **Office Policies & General Information Agreement for Psychotherapy Services Miriam Carmichiel, L.C.S.W.**

*This form provides you (patient) with information that is additional to that detailed in the [Notice of Privacy Practices](#), and it is subject to HIPAA pre-emptive analysis. (Revised 6/06)*

**CONFIDENTIALITY:** All information disclosed within sessions and the written records pertaining to those sessions are confidential and may not be revealed to anyone without your (client's) written permission, except where disclosure is required by law.

**When Disclosure Is Required By Law:** Some of the circumstances where disclosure is required by the law are: where there is a reasonable suspicion of child, dependent or elder abuse or neglect; where a client presents a danger to self, to others, to property or is gravely disabled or when client's family members communicate to Miriam Carmichiel, LCSW that the client presents a danger to others. Disclosure may also be required by court order.

**When Disclosure May Be Required:** In couple and family therapy, or when different family members are seen individually, even over a period of time, confidentiality and privilege do not apply between the couple or among family members, unless otherwise agreed upon. Miriam Carmichiel, LCSW will use her clinical judgment when revealing such information. Miriam Carmichiel, LCSW will not release records to any outside party unless she is authorized to do so by all adult family members who were part of the treatment.

**Emergencies:** If there is an emergency during our work together, or in the future after termination where Miriam Carmichiel, LCSW becomes concerned about your personal safety, the possibility of you injuring someone else, or about you receiving proper psychiatric care, she will do whatever she can, within the limits of the law, to prevent you from injuring yourself or others and to ensure that you receive the proper medical care. For this purpose she may also contact the person whose name you have provided on the biographical sheet.

**Health Insurance & Confidentiality of Records:** Disclosure of confidential information may be required by your health insurance carrier or HMO/PPO/MCO/EAP in order to process the claims. If you instruct Miriam Carmichiel, LCSW, only the minimum necessary information will be communicated to the carrier. Miriam Carmichiel, LCSW has no control or knowledge over what insurance companies do with the information submitted or who has access to this information.

**Consultation:** Miriam Carmichiel, LCSW consults regularly with other professionals regarding her clients; however, client's identity remains completely anonymous, and confidentiality is fully maintained.

**Records and Your Right to Review Them:** Both the law and the standards of my profession require that I keep appropriate treatment records. As a client, you have the right to review or receive a summary of your records at any time, except in limited legal or emergency circumstances or when Miriam Carmichiel, LCSW assesses that releasing such information might be harmful in any way. In such a case Miriam Carmichiel, LCSW will provide the records to an appropriate and legitimate mental health professional of your choice. \* Considering all of the above exclusions, if it is still appropriate, upon your request, Miriam Carmichiel, LCSW will release information to any agency/person you specify unless Miriam Carmichiel, LCSW assesses that releasing such information might be harmful in any way.

**Telephone & Emergency Procedures:** If you need to contact Miriam Carmichiel, LCSW between sessions, please leave a message at 585-703-0129 and your call will be returned as soon as possible. Miriam Carmichiel, LCSW checks her messages several times during each business day and at least once a day on the weekends. If a medical emergency occurs, please state it clearly in your message. If you need to speak to someone right away, please consider calling Lifeline at 275-5151 or 911. There are also instructions regarding use of my emergency on-call service on my voice mail.

**Payments & Insurance Reimbursement:** Clients are expected to pay the fee at the end of each session. Payments may be made in cash (please have correct change) or by check. Telephone conversations, site visits, report writing and reading, consultation with other professionals, release of information, reading records, longer sessions, travel time, etc. will be charged at the same rate, unless indicated and agreed upon otherwise. Please notify Miriam Carmichiel, LCSW if any problems arise during the course of therapy regarding your ability to make timely payments. Not all issues/conditions/problems dealt with in psychotherapy are reimbursed by insurance companies. It is your responsibility to verify the specifics of your coverage. If your account is overdue (unpaid) and there is no written agreement on a payment plan,

Miriam Carmichiel, LCSW can use legal or other means (courts, collection agencies, etc.) to obtain payment. You agree to pay for any such legal costs incurred by Miriam Carmichiel, LCSW for fee collection purposes.

**\*Cancellation:** Since the scheduling of an appointment involves the reservation of time specifically for you, a minimum of 24 hours (1 business day) notice is required for re-scheduling or canceling an appointment. Unless we reach a different agreement, a \$40.00 fee will be charged for sessions missed without such notification. Most insurance companies do not reimburse for missed sessions, so you will be responsible for the \$40.00 fee.

I have read the above Agreement carefully, completed the intake paperwork, signed the informed consent. I understand them and agree to comply with them: I also agree to read carefully the Notice of Privacy Practices

Client name(s) (print)

Date

Signature

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Miriam Carmichiel, LC.S.W.

Date

Signature

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