

CHRISTIAN COUNSELING ASSOCIATES, Inc.

STEVENS FOREST PROFESSIONAL CENTER
9650 Santiago Road, Suite 101
Columbia, MD 21045

(410) 995-5587 or (301) 596-5759
Fax (410) 992-1779
mail@ChristianCounselingAssociates.org

STATEMENT OF POLICIES

FEES CHARGED FOR THERAPY AND RELATED SERVICES:

- **Fee per 45- to 50-minute session after the initial intake evaluation session:**
 - \$115.00 - Counselor with Doctorate, State Licensed or Certified
 - 95.00 - Master's level counselor, State Licensed or Certified
 - 50.00 - Master's level counselor, non-licensed or graduate licensed under supervision
(will not be covered by insurance)
- **Fee for Initial intake evaluation session:**
 - \$150.00 - Counselor with Doctorate, State Licensed or Certified
 - 120.00 - Counselor with Master's, State Licensed or Certified
 - 65.00 - Counselor with Master's, non-licensed or graduate licensed under supervision
(will not be covered by insurance)
- **Fees for Psychological and Educational Testing**, for the **interpretation of test results**, and for the **preparation of written reports**: These fees are determined by the amount of time and expense involved in each case. This should be discussed with the therapist before testing begins.
- **Telephone conversations over 10 minutes** will be pro-rated on the basis of the hourly charge.
- **Preparation and presentation of legal testimony, Preparation of written reports, and other tasks related to reporting on a client's progress** will be billed at a rate not to exceed 150% of the client's normal hourly fee.
- **Charge for Missed Appointments:** A charge of **50% of the counselor's full fee** is made for appointments missed when cancellation is not made by **5 PM the preceding day**. This charge is waived in cases of sudden illness or emergency. Clients might sometimes be reminded of appointments by our office staff, but lack of reminder is not a sufficient reason for an appointment to be missed.
- **Collection Fees:** Should it become necessary for us to use an outside agency to collect money due to us on your account, you will be responsible for all associated fees.

PAYMENT DUE AT TIME OF THERAPY APPOINTMENT:

All client payments are due at the time of the therapy session. This includes all insurance co-payments, insurance deductibles, and all adjusted costs. When 3 sessions are held without client payment, future sessions will be postponed until payment is made against the outstanding balance.

ADJUSTMENTS TO OUT-OF-POCKET COSTS:

We do not make adjustments in the fee. We do, however, adjust the client's out-of-pocket expenses for counseling services based on income and family size. Please talk to the office personnel or your therapist if you believe you may qualify for an adjustment.

INSURANCE COVERAGE:

Most health insurance companies cover "out-patient mental health therapy." Many insurance policies require authorization by a mental health management company, or have other restrictions. **Please check with your insurance carrier** to learn the terms of your coverage and if pre-authorization is needed before beginning therapy. We are willing to submit claims for the expected insurance portion of payment. Please remember that your insurance coverage is never certain until the payment is actually received! **The client or parent/guardian is responsible for the balance if the insurance carrier denies the claim, and for any portion of the yearly deductible of his/her policy.**

CLIENT CONFIDENTIALITY AND RELEASE OF INFORMATION:

According to professional legal and ethical guidelines, a counselor cannot release information about any client to anyone without that client's express authorization except in case of a danger to someone's life or well-being, or under legal requirement such as a court order. By signing CCA's "**Request and Authorization for Counseling Services**" form, a client (or parent/guardian) gives consent for the use of information about the client in providing treatment, securing payment for that treatment, and conducting the normal mental health operations of Christian Counseling Associates, Inc.

THANK YOU FOR PLACING YOUR CONFIDENCE IN OUR PROFESSIONAL STAFF.

Our Staff Members are Committed Christians and Fully Trained Professionals

REV 7/10

CHRISTIAN COUNSELING ASSOCIATES, Inc.

STEVENS FOREST PROFESSIONAL CENTER
9650 Santiago Road, Suite 101
Columbia, MD 21045

(410) 995-5587 or (301) 596-5759
Fax (410) 992-1779
mail@ChristianCounselingAssociates.org

Statement of Client Rights and Responsibilities

As a Client of Christian Counseling Associates, Inc., you have the right to:

- Be treated with fairness, respect and dignity by all members of our staff regardless of who you are and how you are paying for services.
- Be informed of the qualifications of your counselor: education, experience, professional counseling certification(s), and license(s).
- Receive an explanation of services offered, fee scales, and billing policies prior to receipt of services.
- Receive information from your health insurance company or managed care organization about its policies and services, if you are using health care coverage.
- Have your treatment treated confidentially and be informed of any state laws placing limitations on confidentiality in the counseling relationship.
- Ask questions about counseling techniques and strategies and be informed of your progress in counseling.
- Participate in setting goals and evaluating progress toward meeting them, and in making decisions regarding your health care.
- Discuss fully with your counselor your condition and any clinical guidelines or treatment options which exist.
- Request reports and information from your file to be used by other counseling professionals.
- Voice complaints or appeals about decisions made either by your health care management organization or your counselor.
- Terminate the relationship at any time you find it necessary.

As A Client of Christian Counseling Associates, Inc., you have the Responsibility to:

- Provide, as you are able, information that your counselor or your health management organization request in order to provide your care.
- Make and keep appointments with your counselor. Let him or her know as soon as possible if you cannot keep an appointment.
- Pay your fees in accordance with the schedule you pre-established with the counselor or business office.
- Help plan your goals, then follow through with agreed upon goals.
- Keep your counselor informed of your progress towards meeting your goals.
- Terminate your counseling relationship before entering into arrangement with another counselor.

09/2002

Our Staff Members are Committed Christians and Fully Trained Professionals