

Michele Saffier, LMFT, CSAT

Licensed Marriage and Family Therapist

Informed Consent

Welcome to my practice.

This document contains important information about my professional services and business policies. Please read it carefully and let me know if you have any questions.

What is Therapy?

The process of therapy is not easily described. Often, clients find it helpful to express their concerns in an objective and supportive setting, to receive guidance in dealing with their issues, and to gain greater self understanding. Sometimes the benefits of therapy are seen immediately, and sometimes they are not fully experienced until months or years after therapy is finished. Success in therapy depends in part on the motivation of the client, on the particular problems the client is experiencing, and on the quality of the therapist. An active effort on the part of the client during sessions and at home is also an important factor. Some clients need only a few sessions to meet their goals for treatment while others continue in therapy for an extended period of time to try to resolve long-standing issues.

Confidentiality

Communications between a client and a psychologist are protected by law. No information regarding you or your situation will be given to your relatives, employer, school, etc., without your permission. However, there are some instances in which the law requires that confidentiality be broken.

- If a client threatens to cause serious harm to him or herself
- If a client threatens serious bodily harm to another
- If child abuse or dependent adult abuse is suspected
- If a court order requires information (highly unusual)

Contacting Me

You can leave me a voice mail message at 215-552-8938 at any time of day. I monitor messages regularly and will return your call as soon as possible. If you have an urgent situation and cannot wait for me to return your call, you should call your family physician or the emergency room. I can also be reached via e-mail at msaffier@yahoo.com.

Professional Fees

The initial appointment generally lasts about 50 minutes and the fee is \$180. Subsequent individual and family therapy sessions are typically 45 minutes in length, and the fee is \$170. It is my practice to charge you this amount on a prorated basis for time spent on other professional services you may request of me such as report writing, attendance at meetings, or lengthy phone calls. I do not charge for short phone conversations (under 15 minutes). The full fee is due at the time of each appointment (except when otherwise arranged). There is a \$45 charge for returned checks.

Late Cancellation/No Show Policy

If you miss an appointment with short notice, it is not possible to schedule someone else for the time that was reserved for you. You, not the insurance company, are required to pay a full session fee for cancelled or broken appointments when 24 hours advance notice is not given.

Insurance Reimbursement

If you have a health insurance policy, it will usually provide some coverage for mental health treatment. I will provide whatever information is needed for you to submit your claim. Please remember though, that you, and not the insurance company, are responsible for full payment of the fee. Consequently, it is important that you find out exactly what mental health services your policy covers. As you are probably aware, most insurance companies require some information about your situation (such as a clinical diagnosis) before they will cover your benefit. If you desire total confidentiality, this can only be achieved by not utilizing your insurance.

Please sign when you have reviewed this document and if you accept its contents. In signing, you will also be indicating your consent to participate in therapy (or for your minor child to participate). I look forward to working with you in therapy.

Patient Name: _____

Patient Signature: _____

Date: _____