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Pathways to Change

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Practice Policies & Procedures

I am committed to providing you the best possible service. In order to achieve this goal, I need your assistance and understanding of my office policies.

Rights of Clients:

It is appropriate for clients to raise questions about the counselor, the therapeutic approach, the progress of the therapy and the cost. As informed consumers, it is the clients' responsibility to choose the counselor and counseling methods which best suit their needs. Clients have the right to request a change in counseling approach, referral to another counselor or termination at any time.

Consult:

There are times that I may consult with my colleagues regarding client issues. This consultation provides additional insights concerning your treatment. You are not personally identified during this discussion. My colleagues are bound by the same confidentiality rules stated in the disclosure statement and informed consent.

DOH:

Psychotherapists are required to be registered or licensed with the Washington State Department of Health. Registration or licensing does not imply the effectiveness of any treatment. The purpose of this is to provide protection for public health and safety and to also empower the citizens of the state of Washington by providing a complaint process against those counselors who would commit acts of unprofessional conduct. You have many specific rights as a client. For further information you may contact:

Department of Licensing - www.doh.wa.gov or at 360-236-4700 complaint division

Social Networks: I do not accept friend or contact requests from current or former clients on any social or professional networking sites, as doing so may compromise your confidentiality and our therapeutic privacy.

Record Keeping:

I keep a record of the health care services that I provide to you. You may ask to see and be provided a copy of your record. It is your right to also correct that record. I will not disclose your record to others unless you sign a release directing me to do so or unless the law authorizes or requires me to do so. You may also ask that notes not be taken during the session.

Office Policy - Fee Structure:

My session fee is \$140.00 for a 50-minute session. Longer sessions can be scheduled if needed with appropriate related fees. The fee for a session represents payment for my time, regardless of the number of people in the session (individual/couple, or family). Fees will be reviewed periodically and may be adjusted from time to time. You will be provided with at least a one month notice in writing of any fee changes.

Payments and Insurance Coverage:

Payment for services is due at the time services are rendered. I accept cash, checks or credit cards. By Washington State law, I cannot accept medical coupons or barter. Your fees may be tax deductible. I can provide you with a full accounting at the end the calendar year to assist you and your accountant.

I do not bill insurance companies but will provide you with a billing statement. Please inquire with your insurance company prior to your appointment whether they cover Licensed Marriage & Family Therapist Associates. Also, you may wish to inquire with your insurance if they cover "out of network providers," and if so what the coverage is. Many insurance companies do not volunteer this information unless specifically asked. Others may require that you obtain a referral from your medical doctor.

Missed Appointments/Improper Cancellations/Collections:

Your appointed session has been set aside for you. If you miss a session without canceling by phone (not e-mail), or if you cancel by phone with less than 24-hour notice, **you will still be billed in full for that session.** Insurance companies do not pay for sessions in which a person was not actually seen. Let's work together to avoid this taking place. If you are late for a session, you will be seen for the time remaining in your session and be charged for the full session.

Re-scheduling must be done by telephone in order to assure timeliness and to maintain compliance with the 24-hour appointment cancellation policy per the therapy contract. This policy is designed to provide optimal service while protecting your confidentiality.

Any fee for services not paid within 90 days of the date of service will be turned over to a collection agency. The client is responsible for any fees related to the collection process.

Telephone Consultations:

There will be a charge for telephone consultations, originated by the client, which last longer than 10 minutes. The charge will accrue at the onset of the call and will be pro-rated based on the length of the call. During **Regular Business Hours:** (9:00 AM to 6:00 PM, Monday through Thursday), the fee is the agreed upon hourly rate. Consultations outside of these hours will be considered **Emergency Hours** and will be charged at \$280.00 per hour. I will return any messages you leave on my voice mail on my next business day in the office.

I am the only person with access to my voice mailbox. In the event that I am in session with a client or otherwise unavailable, I will return your call as soon as possible. I may not be able to return your call until late in the day or early the next day. Please be sure to leave me both a daytime and nighttime phone number where you can be reached and a convenient time to call you. Please advise me if it is not acceptable for me to call you either at home or work.

Additional Services:

- File and Case Reviews: \$400.00 per hour
- Report Writing: \$400.00 per hour
- Transportation to court: \$400.00 per hour
- Waiting in court to testify: \$400.00 per hour
- Testifying or Depositions: \$400.00 per hour
- Parking and toll reimbursements: (actual cost of fees)

E-mail Communications:

E-mail communications (or texting) cannot always have the assurance of complete security, which is acknowledged and understood by you as part of our agreement. Accordingly, if you choose to communicate with me by E-mail/text, you authorize that you approve and consent to this form of communication as part of your therapy contract. Further, any responses to information communicated by you via E-mail/text that involve therapy dynamics will be done by telephone or in your therapy sessions per your therapy contract guidelines and not via E-mail/text in order to protect your confidentiality. I will only make or confirm appointments or cancellations via Email (or texting).