

CLIENT CONTRACT

Welcome to my practice. This document contains important information about my professional services and business policies. Please read this information carefully and ask about anything that you do not fully understand. Once you sign this agreement it is a binding agreement between us.

Psychological Services:

I offer both individual and group therapies.

In general, psychotherapy is a unique relationship between patient and therapist (and in groups, between group members and with the therapist) that is collaborative in nature and at it's most fundamental, is based on trust, respect, positive regard, and nonjudgment. As the relationship progresses, it increasingly supports you so that you can untangle from strategies that did not work well in the past, heal wounds that have stubbornly persisted, and learn new skills that will allow you to cope in new and possibly more healthful ways.

In the first session you will be sharing what brings you to therapy in a detailed intake session. Together we will identify the places that need the most attention, how best to address them, and establish the beginnings of the therapeutic relationship. If we mutually agree a course of therapy with me would benefit you, then we will schedule subsequent sessions to tackle the issues we identified in the intake. New issues may emerge after we dig into the work together. I may utilize a variety of methods, psychology philosophies and theories to help you depending upon your unique presenting problems including, but not limited to, Attachment Theory, neuropsychology, interpersonal and humanistic approaches, mindfulness based approaches, Internal Family Systems or "parts work", psycho-dynamic and emotion-focused therapy.

Benefits and Emotional Risks:

The majority of people who obtain mental health services benefit from the process. Therapy is generally quite helpful, but some risks do exist. Risks sometimes include experiencing uncomfortable feelings such as sadness, anger, guilt, or frustration. Others experience discomfort with the inherent vulnerability of the therapeutic process. However, many people have found that therapy ultimately leads to a significant reduction in feelings of distress, better relationships, and resolutions of specific problems. Still, there are no guarantees about what will happen in any one therapy. I strongly encourage you to raise any questions you have about treatment goals, procedures, or your impression of your services you are receiving at any point along the therapeutic process.

Confidentiality:

A patient's confidentiality is of primary importance and is legally protected. In most circumstances, your confidentiality will be strictly guarded. There are, however, circumstances that impose limitations on a patient's right or ability to maintain confidential communications. Some examples of

the times when confidentiality must be broken are:

- 1) I believe that you are in immediate danger of hurting or killing yourself;
- 2) I believe that you are going to hurt or kill another person;
- 3) A case of child abuse, elder abuse, or other disabled person is being abused or has been abused in the past.

Cancellation Policy:

If you must cancel an appointment, **please give a minimum of 24-hour advance notice. If you cancel an appointment without giving at least 24 hour notice you will be charged and responsible for paying the full fee for that hour.** Exceptions will only be made in cases of emergency such as hospitalization, accidents, or death in the family. **If you have Johns Hopkins EHP your insurance does not pay for missed appointments. Instead, you will be responsible for paying the full fee for the missed appointment.**

For those with chronic medical issues who have to cancel the day of the appointment due to illness, a phone session will be offered to you. If you decline the phone session, you will be responsible for paying the full fee for the missed session.

Sessions may not be held on days that Baltimore County or Baltimore City Schools are closed due to inclement weather. I will contact you to cancel a session if I cannot proceed with the day's scheduled appointments either via email and/or telephone. However, if you are unsure if your session will be held due to inclement weather please call the office phone number 410-246-4150 or email me at vanessa@vanessapiklerphd.com.

Services, Payment and Fees:

(Updated January 1, 2022)

First Consultation – 75-90 minutes:	\$198.00
Individual Session – 50 minutes:	\$165.00
Group Sessions – 50 minutes:	varies
Couples Session – 50 minutes:	\$185.00
Report / Letter Writing – per 30 minutes:	\$ 85.00
Record Copying – Time:	\$ 15.00
Record Copying – Per Page:	\$ 0.35

I accept only one insurance plan, Johns Hopkins EHP. Otherwise my practice is a Fee-for-Service business which means **I do not accept** insurance as a form of payment for services. Instead, the patient is responsible for the bill. All sessions must be paid at time of service. You may pay by credit card, check, or cash. If you pay by check, you should know that there will be an additional \$30.00 fee for checks returned for insufficient funds.

Regardless of the payment mechanism (i.e., credit card, cash, check) payment is expected at the time services are rendered and will be collected by me at the end of each session. This includes copays for Johns Hopkins EHP insurance holders. If you wish, a detailed receipt can be provided which will contain all of the necessary information for submission to your insurance company in order to request out of network reimbursement.

Contacting Me:

I am often not immediately available by telephone but I encourage you to either call or email me whenever you need to. I will return any messages left on my voice mail or email as soon as I am available, usually within 24 hours of receiving your call or email. When I am unavailable, my telephone will be answered by voice mail. I am the only person who has access to this voice mail so you may leave a detailed message and your privacy will be maintained. **In cases of life threatening emergency or psychiatric emergency, please call 911 or go to the nearest hospital emergency room.**

Professional Records:

Both law and the standards of my profession require that I keep appropriate treatment records. Occasionally, patients request to see their records. Because these are professional records, they can be misinterpreted and/or can be upsetting to lay readers. So, if your records contain information that I believe could be harmful to you, I will create a summary of the record and give you a copy of the summary. Under these circumstances, it is usually best that the summary be reviewed with me so that anything that requires additional explanation can be discussed immediately. If records are requested and authorization is granted for their release, an appropriate fee will be charged to the patient's account for preparation time of the record and costs of the copies.

Authorization / Agreement:

By signing this Service Contract, you agree that you have reviewed this information and agree to these conditions.

Signature of Patient/Legal Guardian

Date