

COUNSELING WITH TAMARA G. SUTTLE, M.ED., LPC

Welcome to my counseling practice! I am honored that you have chosen to ask me to help you create and explore possibilities for change!

It is important to me that you know how we will work together. I believe our work will be most helpful to you when you have a clear idea of what we are trying to do. This document is intended to provide answers to some questions clients often ask about that process.

Included in this document is general information about:

- Risks and benefits of counseling,
- Goals of our work together and what my methods of counseling are like,
- Length of counseling,
- How much my professional services cost and how I handle money matters, and
- Other important areas of our relationship.

After you read this document, we can discuss how these issues apply to your own situation. This is your copy to keep and refer to later. Please read all of it and mark any parts that are not clear to you. Write down any questions you think of, and we will discuss them at our next meeting. When you have read and fully understand this document, I will ask you to sign the last page of it and return it to me.

My Background

I am a coach and counselor with over 22 years of experience. For the past 20 years, I have had my own office for the general practice of clinical counseling and personal coaching. I am trained and experienced in providing counseling one-on-one, with couples and in groups with adults and adolescents. Earlier in my career, I worked in mental health clinics and psychiatric hospitals. I hold these qualifications:

- I am licensed as a professional counselor in both Colorado (#3274) and Texas (#10854).
- I have a Masters Degree in Counseling from the University of North Texas in Denton, Texas; this is a program that was approved by the Council for Accreditation of Counseling and Related Educational Programs (CACREP).
- I completed an internship in counseling at Psychiatric Institute of America.
- I completed training to meet supervisory status as a counselor in Texas.
- I am certified by the National Board of Certified Clinical Hypnotists.
- I am a professional member of the ACA (#5062568).

I am a member of the Colorado Counseling Association (CCA) and a Past President of the Colorado Licensed Professional Counselors Association (CLPCA).

What to Expect from Our Relationship

As a professional, I will use my best knowledge and skills to help you. This includes following the standards of the American Counseling Association, or ACA. In your best interests, the ACA puts limits on the relationship between a therapist and a client, and I will abide by these. Let me explain these limits, so you will not think they are personal responses to you.

First, I am licensed and trained to practice counseling – not law, medicine, finance, or any other profession. I am not able to give you good advice from these other professional viewpoints.

Second, the state laws and the rules of the ACA require me to keep what you tell me confidential. You can trust me not to tell anyone else what you tell me, except in certain limited situations. I explain what those are in the “About Confidentiality” section of this document. Here I want to explain that I try not to reveal who my clients are. This is part of my effort to maintain your privacy. If we meet on the street or socially, I will not approach you or say “hello.” My behavior will not be a personal reaction to you, but a way to maintain the confidentiality of our relationship.

Third, in your best interest, and following the ACA's standards, I can only be your therapist. I cannot have any other role in your life. In a professional relationship, sexual intimacy is never appropriate and should be reported to the Grievance Board. I cannot, now or ever, be a close friend or socialize with you. Except for the situations I have described above, I will always maintain your privacy. I also ask you not to disclose the name or identity of any other client being seen in this office.

I make every effort to keep the names and records of clients private. I will try never to use your name on the telephone, if clients in the office can overhear it.

If your records need to be seen by another professional or anyone else, I will discuss it with you. If you agree to share these records, you will need to sign a form consenting to such disclosure. This form states exactly what information is to be shared, with whom, and why, and it also sets time limits. You may read this form at any time. And, you may rescind your permission to disclose information at any time. If you have questions about this process, please ask me.

It is my office policy to destroy clients' records 15 years after the end of our therapy. Until then, I will keep your case records in a safe place.

If I must discontinue our relationship because of illness, disability, or other presently unforeseen circumstances, I ask you to agree to permit me to transfer your records to another therapist of my choice who will assure the confidentiality, preservation, and appropriate access to your records. By signing this document, you are giving your consent to this request.

If we engage in family or couple therapy (where there is more than one client), and you want to have records of our work together sent to anyone, all of the adults present must provide written consent before any information will be released to any third party.

Working Together

Because you will be putting a good deal of time, money, and energy into counseling, you should choose a counselor carefully. I strongly believe you should feel comfortable with the therapist you choose, and hopeful about the work ahead of you. Research shows that when you feel this way, you drastically increase the probability of therapy being helpful to you. Let me describe how I see our work together.

My theoretical approach is both holistic and systemic – meaning that I believe nothing happens in a vacuum. Those situations that are affecting you emotionally are also affecting your body and your spirit. For that reason, we will be looking at what supports you and what challenges you in multiple areas of your life.

My work tends to be solution-focused and strength-based. I am influenced by interests in psychodynamic and relational therapies, positive psychology, creative and expressive arts, cultural education, leadership development, social justice and women's issues. Based on your unique needs and level of comfort, I may integrate methods and techniques drawn from many different schools of thought including but not limited to conscious conversations, hypnosis, journaling, role play, music, bibliotherapy, Neurolinguistic programming, thought training, desensitization, and imagery.

In our work together, you may find that I use both developing and research-based technologies. Developing technologies are those that may be newer and, in my professional opinion, show promise; however, they do not yet have a strong body of research to support / verify their effectiveness. The research-based technologies that I use are those which have been in existence long enough to support / verify their effectiveness with clients who have goals similar to yours. Ultimately, my clinical practice is focused on *your* possibilities – possibilities for healing, possibilities for growth, possibilities for change, possibilities for learning, possibilities for insight and possibilities for understanding.

The most central ideas in my work include the following:

- Challenging and difficult times in our lives afford us *opportunities to learn*. If we get “stuck” viewing them merely as “problems,” it is very likely that we will repeat those difficult times over and over again and feel like a failure for doing so.
- We *all* do what we do for a reason -- the choices we make *mean* something.
- We take our experiences from childhood (and the lessons we learned from those experiences) into our adulthood. Oftentimes, as adults, we need to *unlearn* some of those faulty lessons and *re-learn* more effective strategies for solving problems.
- The more time we spend focusing on “problem talk,” the more time we spend in the midst of the problem; and, conversely, the more time we spend focusing on “solution talk,” the more time we spend in the midst of the solution.
- The goal of my work with you is to help you find *solutions and possibilities* to the challenges that you are facing *today*.

Counseling is not like visiting a medical doctor. It requires your courage and commitment to this work. I will ask you many questions such as “what is important to you,” “what do certain experiences *mean* to you,” “what strong feelings are involved,” and “what choices you do want to make?” Our work together requires your best efforts to change thoughts, feelings, and behaviors. This is one of the ways that you are an active partner in counseling.

We will plan our work together - the areas to work on, our goals, the methods we will use, commitments we will make, and many other things. We will agree on a plan that we will both work hard to follow. We will continuously look together at our progress and goals. If we think we need to, we can change our plan at any time.

I want you to be able to create steps toward success *without me*. I encourage you to learn more about the things that we will talk about. I may bring articles for you to read or recommend books to help you understand more about the tasks that we undertake. And, I will ask you to keep a journal about our work together. Your journal will be *for your eyes only*.

I usually take notes during our meetings. You may find it useful to take your own notes in your journal, and also to take notes between our sessions.

An important part of your therapy will be practicing new skills that you will learn in our sessions. I will ask you to practice outside our time together and we will work to set up homework assignments for you. I might ask you to do exercises, to keep records, and perhaps to do other tasks to deepen your learning. You will probably have to work on relationships in your life and make long-term efforts to get the best results. These are important parts of personal change. Change will sometimes be easy and quick, but sometimes it will be slow and frustrating, and you will need to keep trying. There are no instant, painless cures and no “magic pills.” However, *you can learn* new ways of looking at your situation that will be very helpful for changing how you feel and how you react.

Most of my clients see me once a week for 3 to 4 months. After that time, we may choose to meet less often for several more months. Counseling then usually comes to an end. The process of ending therapy, called “termination,” can be a very valuable part of our work. Stopping therapy should not be done casually, although either of us may decide to end it if we believe it is in your best interest. If you wish to stop therapy at any time, I ask that you agree *now* to meet then for at least one session to review our work together. We will review our goals, the work we have done, any future work that needs to be done, and our choices. If you feel that a change in therapists is appropriate, I will be happy to provide you with the names of other clinicians that may be able to assist you. Or, if you would like to take a “time out” from counseling to try it on your own, we should discuss this. By doing so we can often increase the benefits of your “time out.”

I will send you a brief set of questions about 6 months after our last session. These questions will ask you to look back at our work together; sending them to you is part of my duty as a therapist. I ask that you agree, as part of entering therapy with me, to return this follow-up form and to be very honest about what you tell me then.

Limits of the Counseling Relationship – What Every Client Should Know

Psychotherapy is a professional service I can provide to you. Because of the nature of counseling, our relationship has to be different from most relationships. It may differ in how long it lasts, in the topics we discuss, or in the goals of our relationship. It must also be limited to the relationship of therapist and client *only*. If we were to interact in any other ways, we would then have a “dual relationship,” which would not be right and may not be legal. The different therapy professions have rules against such relationships to protect us both.

I want to explain why having a dual relationship is not a good idea. Dual relationships can set up conflicts between my own (the therapist’s) interests and your (the client’s) best interests, and then your interests might not be put first. In order to offer all my clients the best care, my judgment needs to be unselfish and professional *at all times*.

Because I am your counselor, dual relationships like these are improper:

- I cannot be your supervisor, teacher, or evaluator.
- I cannot be a counselor to my own relatives, friends (or the relatives of friends), people I know socially or business contacts.
- I cannot provide counseling to people I used to know socially, or to former business contacts.
- I cannot have any other kind of business relationship with you besides the counseling itself. For example, I cannot employ you, lend to or borrow from you or trade or barter your services (things like tutoring, repairing, child care, etc.) or goods in exchange for counseling.
- I cannot give legal, medical, financial, or any other type of professional advice.
- I cannot have any kind of romantic or sexual relationship with a former or current client, or any other people close to a client.

There are important differences between counseling and friendship. As your counselor, I cannot be your friend. Friends may see you only from their personal viewpoints and experiences. Friends may want to find quick and easy solutions to your problems so that they can feel helpful. These short-term solutions may not be in your long-term best interest. Friends do not usually follow up on their advice to see whether it was useful. They may *need* to have you do what they advise. A counselor offers you choices and helps you choose what is best for you. A counselor helps you learn how to solve problems better and make better decisions. A counselor’s responses to your situation are based on tested theories and methods of change. You should also know that counselors are required to keep the identity of their client’s secret. Therefore, I may ignore you when we meet in a public place, and I must decline to attend your family’s gatherings if you invite me. Lastly, when our counseling is completed, I will not be able to be a friend to you like your other friends.

In sum, my duty as counselor is to care for you and my other clients, but *only* in the professional role of counselor. Please note any questions or concerns on the back of this page so we can discuss them.

The Benefits and Risks of Therapy

As with any powerful treatment, there are risks as well as benefits associated with therapy. You should think about both the benefits and risks when making any treatment decisions. For example, in therapy, there is a risk that clients will, for a time, have uncomfortable levels of anxiety, sadness, guilt, anger, frustration, loneliness, helplessness, or other negative feelings. Clients may recall unpleasant memories. These feelings or memories may bother a client at work or in school. In addition, some people in your community may mistakenly view anyone in therapy as weak, or perhaps as seriously disturbed or even dangerous. Also, clients in therapy may have problems with people important to them. Family secrets may be told. Therapy may disrupt a significant relationship and sometimes may even lead to a divorce. Sometimes, too, a client’s problems may temporarily worsen after the beginning of treatment. Most of these risks are to be expected when people are making important changes in their lives. Finally, even with our best efforts, there is a risk that therapy may not work out well for you.

While you should consider these risks, you should also know that the benefits of therapy have been supported by scientists in hundreds of well-designed research studies. People who are depressed may

find their mood lifting. Others may no longer feel afraid, angry, or anxious. In therapy, you have an opportunity to talk things out fully until your feelings are relieved or the problems are solved. Your relationships and coping skills may improve greatly. You may get more satisfaction out of social and family relationships. Your personal goals and values may become clearer and more likely to be achieved.

My clients may grow in many directions – as individuals, in their close relationships, in their work or schooling, on their spiritual paths, and in the ability to enjoy their lives. While there is hope that improvement will occur as part of the therapeutic process, there is no guarantee. However, I do not accept clients into my practice that I do not think I can help. Therefore, I will enter our relationship with optimism about our progress.

If you could benefit from a treatment that I cannot provide, I will try to help you to get it. You have a right to ask me about other such treatments, their risks, and their benefits. Based on what I learn about your problems, I may recommend that you consult with a physician. If I do this, I will fully discuss my reasons with you, so that you can decide what is best. If you are treated by another professional, I will coordinate my services with them and with your own medical doctor.

If for some reason treatment is not going well, I may suggest that you see another therapist or another professional in addition to me. As a responsible person and ethical therapist, I cannot continue to treat you if my treatment is not working for you. If you wish for another professional's opinion at any time, or wish to talk with another therapist, I can help you find a qualified person and will provide him or her with the information needed.

Use of Technology

Many clients choose to use cell phones, cordless phones, faxes, email and computers to augment their counseling with me. It is important for you to know that these methods come with additional risks. These risks include but are not limited to the following:

- The possibility of technology failure resulting in messages / information not being received.
- The possibility of misunderstandings is increased with text-based modalities such as email due to the absence of nonverbal / visual cues.
- Use of email may result in various servers creating permanent records of these transactions.
- Many employers and government agencies review email archives on a routine basis, record letters typed on a keyboard, and / or engage in data mining programs to identify transmissions containing specified content.
- My email is not checked daily and may result in a possible lag in turnaround / response.
- Confidentiality may be breached at many points when using electronic communication including unauthorized monitoring / interception of transmissions from your computer and my own; it may also be breached as the information passes through the servers along the route to each other. This means that it is possible that third parties may access your records / communication.
- What is said on line may be viewed by others.
- Assessment / diagnosis often becomes more difficult without the benefit of face-to-face contact.
- Your insurance may not cover technology-assisted distance counseling.
- Your insurance company may also consider our electronic communication (in all forms) to be part of the medical record and request them.
- Our email communication is *not encrypted*. However, encrypted email messages can be decoded by motivated hackers.

For the above reasons, email is only to be used for business-related or logistical communication and is not to be used as a means of therapy. I cannot guarantee confidentiality when you and I are communicating via cell phone, cordless phone, fax, email or computer. These devices could compromise confidentiality. By understanding the inherent risks of the aforementioned devices, you can make an informed choice about when / where / how to use those tools.

Confidentiality in Therapy

I will treat what you tell me with great care. My professional ethics (that is, my profession's rules about moral matters) and the laws of this state prevent me from telling anyone else what you tell me unless you give me written permission. These rules and laws are the ways our society recognizes and supports the privacy of what a therapist and client talk about – in other words, the “confidentiality” of therapy.

However, it is important for you to know that I cannot promise that everything you tell me will *never* be revealed to someone else. There are some times when the law requires me to tell things to others. There are also some other limits on our confidentiality. We need to review these, because I want you to understand clearly what I can and cannot keep confidential. You need to know about these rules now, so that you don't tell me something as a “secret” that I cannot keep. These are very important issues, so please read these pages carefully and keep a copy for your records. At our next meeting, we can discuss any questions you might have about confidentiality.

When you or other persons are believed to be in physical danger, the law requires me to tell others about it. Specifically:

- If I come to suspect that you are threatening serious harm to another person, I am required to try to protect that person. I may have to tell the person and the police, or perhaps try to have you put in a hospital.
- If you seriously threaten or act in a way that is very likely to harm yourself, I may have to seek a hospital for you, or to call on your family members or others who can help protect you. If such a situation does come up, I will fully discuss the situation with you before I do anything, unless there is a very strong reason not to.
- In an emergency where your life or health is in danger, and I cannot get your consent, I may give another professional some information to protect your life. I will try to get your permission first, and I will discuss this with you as soon as possible afterwards.
- If I believe or suspect that you are abusing a child, an elderly person, or a disabled person, I must file a report with a state agency. To “abuse” means to neglect, hurt, or sexually molest another person. I do not have any legal power to investigate the situation to find out all the facts. The state agency will investigate. If this might be your situation, we should discuss the legal aspects in detail before you tell me anything about these topics. You may also want to talk to your lawyer.

In any of these situations, I would reveal only the information that is needed to protect you or the other person. I would not tell everything that you have told me.

In general, **if you become involved in a court case or proceeding**, you can prevent me from testifying in court about what you have told me. This is called “privilege,” and it is your choice to prevent me from testifying or to allow me to do so. I usually have no legal or ethical duty to report a crime that occurred in the past or one that is imminent. However, there are some situations where the law, a judge or court may require me to report / testify. These include but may not be limited to the following:

- In any situations that involve the welfare of a child such as child abuse / neglect;
- In child custody or adoption proceedings, where your fitness as a parent is questioned or in doubt;
- In situations involving the physical violence exception of the “duty to warn and protect” statute;
- In cases where your emotional or mental condition is important information for a court's decision – including my duty to initiate a 72-hour hold for your evaluation because of imminent danger to yourself or others;
- During a malpractice case or an investigation of me or another therapist by a professional group;
- In a civil commitment hearing to decide if you will be admitted to or continued in a psychiatric hospital;
- When you are seeing me for court-ordered evaluations or treatment. In this case, we need to discuss confidentiality fully because you don't have to tell me what you don't want the court to find out through my report.

There are a few other things you must know about confidentiality and your treatment:

- I may sometimes consult with another professional about your treatment. This other person is also required by professional ethics to keep your information confidential. Likewise, when I am

out of town or unavailable, another therapist may be available to help my clients. I must give him or her some information about my clients, like you.

- I am required to keep records of your treatment, such as the notes I take when we meet. You have a right to review these records with me. If something in the record might seriously upset you, I may leave it out, but I will fully explain my reasons to you.

Here is what you need to know about confidentiality **in regard to insurance and money matters:**

- If you use your health insurance to pay a part of my fees, insurance companies require some information about our therapy. Insurers such as Blue Cross / Blue Shield or managed care organizations ask for much information about you and your symptoms, as well as a detailed treatment plan.
- I will not send any statements or other information to your insurance company. I will only give such information to you. That way, you can see what your insurance company will know about our therapy. It is against the law for insurers to release information about our office visits to anyone without your written permission. Although I believe the insurance company will act legally, I cannot control who sees this information at the insurer's office. You cannot be required to release more information just to get payments.
- If you have been sent to me by your employer's Employee Assistance Program, the program's staffers may require some information. Again, I hope that they will act legally, but I cannot control who sees this information at their offices. If this is your situation, let us fully discuss my agreement with your employer or the program before we talk further.
- If your account with me is unpaid and we have not arranged a payment plan, I can use legal means to get paid.

Children and families create some special confidentiality questions.

- When I treat clients between the ages of 15 and 18, I use my professional judgment to determine what information will remain confidential between the adolescent and myself and what information is appropriate to be shared with parents / guardians concerning treatment issues. . However, parents / guardians do have the right to *general* information, including how therapy is going and dates of service. They need to be able to make well-informed decisions about therapy. The law may also require me to tell parents or guardians some information about other family members that I am told. This is especially true if these others' actions put the client or others in any danger.
- In cases where I treat several members of a family (parents and children or other relatives), the confidentiality situation can become very complicated. I may have different duties toward different family members. At the start of our treatment, we must all have a clear understanding of our purposes and my role. Then we can be clear about any limits on confidentiality that may exist.
- If you tell me something your spouse does not know, and not knowing this could harm him or her, I cannot promise to keep it confidential. I will work with you to decide on the best long-term way to handle situations like this.
- If you and your spouse have a custody dispute, or a court custody hearing is coming up, I will need to know about it. My professional ethics prevent me from doing both therapy and custody evaluations.
- If you are seeing me for couples counseling, you must agree at the start of treatment that if you eventually decide to divorce, you will not request my testimony for either side. The court, however, may order me to testify.
- At the start of family treatment, we must also specify which members of the family must sign a release form for the common record I create in the therapy or therapies.
- And, finally, Colorado state law prohibits all participants in couples / family therapy from disclosing any knowledge gained during the course of therapy *without the consent of the person to whom the knowledge relates*.

Confidentiality in group therapy is also a special situation.

- In group therapy, the other members of the group are not therapists. They do not have the same ethics and laws that I have to work under. You cannot be certain that they will always keep what you say in the group confidential. However, if you are a participant in group therapy, Colorado

law requires you to NOT disclose any knowledge gained during the course of therapy *without the consent of the person to whom the knowledge relates*.

Finally, here are a few other points:

- I will not record our therapy session on audiotape or videotape without your written permission.
- If you want me to send information about our therapy to someone else, you must sign a “release of records” form. I have copies you can see, so you will know what is involved.
- Any information that you also share outside of therapy, willingly and publicly, will not be considered protected or confidential by a court.

The laws and rules on confidentiality are complicated. Please bear in mind that I am not able to give you legal advice. If you have special or unusual concerns, and so need special advice, I strongly suggest that you talk to a lawyer to protect your interests legally and to act in your best interests.

About Our Appointments

I am available to work with you at regularly scheduled appointment times. If you wish, I will be happy to reserve a regular standing appointment time for you into the foreseeable future. I also do this for my other clients. The very first time I meet with you, we will need to give each other much basic information. For this reason, I usually schedule 1 ½ -2 hours for this first meeting. Following this, we will usually meet for a 50 minute session once a week for a while and gradually taper off to less frequent appointments. We can schedule meetings for both your and my convenience.

An appointment is a commitment to our work together. We agree to meet and to be on time. If I am ever unable to start on time, it will most likely be due to an emergency and I ask for your understanding. I assure you that you will receive the full time agreed to. If you are late, we will probably be unable to meet for the full time, because it is likely that I will have another appointment after yours.

I will consider our meetings very important and ask you to do the same. Your session time is reserved only for you. Please try not to miss sessions if you can possibly help it. A cancelled appointment delays our work. When you must cancel, please give me at least 24 hours notice. I am rarely able to fill a cancelled session unless I know at least 24 hours in advance. If you are unable to provide at least 24 hours notice when you cancel, you will be charged the full fee for your session unless I am able to fill it with another client. (You should note that insurance companies do not typically reimburse for missed appointments.) The only time I will waive this fee is in the event of serious or contagious illness or emergency.

Fees, Payments, and Billing

Payment for services is an important part of any professional relationship. This is even truer in therapy; one treatment goal is to make relationships and the duties and obligations they involve clear. You are responsible for seeing that my services are paid in full. Meeting this responsibility shows your commitment and maturity.

Your fees may be paid by cash, money order, or personal check. Credit cards are accepted only by prior arrangement. As with other professions, all fees will be based on travel time *portal to portal* and the time involved in providing the service at my regular fee schedule. You will be given at least 30 days notice in advance if my fees should change. My current regular fees are as follows:

Regular therapy services: For a session of 50 minutes, the fee is \$100 before 5 pm. After 5 pm, my fees increase to \$125 / 50 minute session. I suggest if you are paying by check, that you make out your check before each session begins so that our time can be used to focus on your primary concerns. It has been my experience that this arrangement works best to help us stay focused on your goals and not take away from our time together. Keeping your fees current allows me to keep my fees as low as possible by

reducing my bookkeeping costs. Other payment or fee arrangements must be worked out before the end of our first meeting. **Please be prepared to pay for each session at its beginning.**

Telephone consultations / appointments: I believe that telephone consultations may be suitable or even needed at times in our therapy. If so, I will charge you our regular fee, prorated over the time needed. If I need to have telephone communication that extends beyond 10 minutes with other professionals as part of your treatment, you will be billed for these at the same rate as for regular therapy services. If you are concerned about this policy, please be sure to discuss it with me in advance so we can set a policy that is comfortable for both of us. Of course, there is no charge for brief calls about appointments or similar business.

Extended sessions: Occasionally, it may be better to go on with a session rather than stop or postpone work on a particular issue. When this extension is more than 10 minutes, I will consult with you, because sessions that are extended beyond 10 minutes will be charged on a prorated basis.

Psychological testing services: \$150 per hour. Psychological testing fees include the time spent with you, the time needed for scoring and studying the test results, and the time needed to interpret / write a report on the findings. The amount of time involved depends on the tests used and the questions the testing is intended to answer.

Reports: \$150 per hour. I will bill you for any long or complex reports / correspondence that you might require. It is unlikely that your insurance company will reimburse you for this fee.

Court / Mediation services: \$300 per hour. Consultations with attorneys and social services, court-related clinical reports, court preparation, depositions, expert witness, attendance at courtroom / mediation proceedings, and court-related travel time / phone calls are strongly discouraged.

Hospital visits / Consultation with other therapists: \$125 per hour. Appointments at alternative locations such as hospitals, home visits, and other therapists offices will be based on travel time, portal to portal, and the time involved in providing the required service at my regular fee schedule. Some services may require payment in advance.

I realize that my fees involve a substantial amount of money, although they are well in line with similar professionals' charges. For you to get the best value for your money, we must work hard and well.

I will assume that our agreed-upon fee-paying relationship will continue as long as I provide services to you. I will assume this until you tell me in person, by telephone, or by certified mail that you wish to end it. You have a responsibility to pay for any services you receive before you end the relationship.

Because I expect full payment at the time of our meetings, I usually do not send bills. However, I will provide a receipt at the conclusion of each session. That statement can be used for health insurance claims, as described in the next session. If we have agreed that I will bill you, I ask that the bill be paid within 5 days of when you receive it.

If you think you may have trouble paying your fees on time, please discuss this with me. If this occurs, I will also raise the matter with you so we can arrive at a solution. If there is any problem with my charges, my billing, your insurance, or any other money-related point, please bring it to my attention. I will do the same with you. Such problems can interfere greatly with our work. They must be worked out openly and quickly.

If your bill remains unpaid for an excessive amount of time, I am required to stop therapy with you. Fees that continue unpaid after this will be turned over to small-claims court or a collection service. **In the event that it is necessary to commence proceedings to collect money owed for professional services rendered, you will be expected to pay reasonable collection costs and fees incurred, including but not limited to attorney's fees.**

I have made the choice not to contract with Managed Care Companies (MCC) for my professional services. Listed below you will find my thoughts concerning this decision.

Conflicts of Interest – As a Licensed Professional Counselor, I am required to avoid potential conflicts of interest. My primary concern is for your well-being. Therapists working under the constraints of MCC are sometimes put in the position of having to choose between what is in their own best interest and what is in their client's best interest.

Managed Care Companies were created to “manage” and contain escalating healthcare costs. Their bottom line is to reduce costs and raise profits; it is not to increase the quality of care or quality of life for you. In many cases, therapists who contract with MCC are actually paid to NOT see clients.

Restricted Choice - Often MCC restrict your choice of therapist by offering only short term / brief therapy that I refer to as “drive-by” therapy which meets the financial criteria of MCC but may fail to afford you the opportunity to get the information / therapy that you want / need. It is my belief that this often results in your quality of care being compromised. This, of course, can result in the possibility of your needs going unmet.

Managed Care Companies often choose to limit what therapies are offered, restrict what is discussed in therapy, and decide which clients can be seen and for how long. Some MCC have even included “gag clauses” in their contracts to prevent therapists from suggesting more effective treatments

Professional Expertise - I believe that you should be able to access the full range of mental health professionals according to your needs. Often MCC restrict the professionals that you are allowed to work with - preferring to refer you to therapists who have a record of providing short term therapy rather than to other therapists who may provide better results or offer a different packaging of services.

Contractual Limitations – I believe that you have the right to full disclosure of any arrangements, agreements or restrictions between any third party and me that could interfere with or impact your treatment. Managed Care Companies may label counselors' choices to advocate for clients in this manner as “Managed Care Unfriendly Behaviors” and take such actions as they deem fit. Typically “violations” such as these result in therapists being removed from provider panels or censured in other ways.

Privacy / Confidentiality – By contracting with MCC, it is likely that I would be required to share your deeply personal information with gatekeepers and utilization review professionals; it would mean potentially allowing literally hundreds of other to have access to your personal information.

Medication – Research has consistently shown that medication for problems with mood is most effective when combined with psychotherapy. Nevertheless, MCC frequently approve medication only for their members rather than permit them to work with a mental health counselor. Again, the appearance is that of being more concerned about money rather than my client's needs.

Time – Managed Care Companies usually require therapists to justify and convince Utilization Review members before treatment is approved / continued. This is time consuming for the therapist and for the client who is required to continue her therapy in “fits and starts.”

Diagnosis and Stigma – Managed Care Companies typically cover only those services deemed “medically necessary” which is defined as being literally about life and death and the treatment of illness. This means that they require a diagnosis of *mental illness* for my clients.

My practice is solution- focused on your quality of life and your desires. We spend our time talking about prevention, personal growth, and exploration rather than simply survival.

**If You Choose to File on Your
Traditional (or “Indemnity”) Health Insurance Plan or Opt to Go Out of Network**

Revised 04-25-08

Because I am a Licensed Professional Counselor, many health insurance plans will help you pay for therapy and other services that I offer. Because health insurance is written by many different companies, I cannot tell you what your particular plan covers. Please read your plan's booklet under coverage for "Outpatient Psychotherapy" or under "Treatment of Mental and Nervous Conditions." Or, call your employer's benefits office to find out what you need to know.

If your health insurance will pay part of my fee, I can help you with your insurance claim forms. However, please keep two things in mind:

1. I have no role in deciding what your insurance covers. Your employer decided which, if any, services will be covered and how much you will be reimbursed. You are responsible for checking your insurance coverage, deductibles, payment rates, co-payments, and so forth. Your insurance contract is between you and your company; it is not between me and the insurance company.
2. You – not your insurance company or any other person or company – are responsible for paying the fees we agree upon. I do not bill insurance companies for your reimbursement or my fees. I require my payment to come directly from you.

To seek payment from your insurance company, you must first obtain a claim form from your employer's benefits office or call your insurance company. Complete the claim form. Then attach my statement to the claim form and mail it to your insurance company. My statement already provides the information asked for on the claim.

If You Need to Contact Me

Although I may be in my office Monday through Friday, I do not take phone calls when I am with a client. You can always leave a message on my voicemail and I will return your call as soon as I can. Generally, I will return messages within 24 hours except on Saturdays, Sundays, and holidays.

I do not provide crisis counseling and cannot promise that I will be available at all times. If you have an emergency or crisis, I encourage you to leave this message on my voicemail. However, if you are in need of immediate support, after leaving a voicemail for me, you or your family members should call one of the following:

- 911 or
- Arapahoe / Douglas County Mental Health office at 303-797-9346 or
- Women's Crisis Center at 303-688-1094 or
- Centennial Mental Health Center 303-646-4519.

Divorce / Custody Disputes

If you ever become involved in a divorce or custody dispute, I will not provide evaluations or expert testimony in court. You should hire a different mental health professional for any evaluations or testimony you require. This position is based on two reasons: (1) My statements will be seen as biased in your favor because we have a therapy relationship; and (2) the testimony might affect our therapy relationship, and I must put this relationship first. By signing this document, you are acknowledging your full understanding of and agreement to my position on this matter.

Statement of Principles Complaint Procedures

It is my intention to fully abide by all the rules of the American Counseling Association (ACA) and by those of my state licenses.

Problems can arise in our relationship, just as in any other relationship. If you are not satisfied with any area of our work, please raise your concerns with me at once. Our work together will be slower and harder if your concerns with me are not worked out. I will make every effort to hear any complaints you have to seek solutions to them.

If you feel that I, or any other therapist, has treated you unfairly or has even broken a professional rule, please tell me. You can also contact the state or local counseling association and speak to the chairperson of the ethics committee. He or she can help clarify your concerns or tell how to file a complaint.

In Colorado, the practice of both licensed and unlicensed persons and certified school psychologists is regulated by the Department of Regulatory Agencies. In Texas, the practice of counseling is restricted to Licensed Professional Counselors and is regulated by the Department of State Health Services You may also contact the State Board of Licensed Professional Counselors, the organization that licenses those of us in the independent practice of counseling at:

Division of Registrations
Colorado Mental Health Section Inquiries/Complaints
1560 Broadway, Suite 880
Denver, CO 80202

OR

Texas State Board of Examiners of Professional Counselors
1100 West 49th Street
Austin, TX 78756-3183

In my practice as a therapist, I do not discriminate against clients because of any of these factors: age, gender, marital / family status, race, color, religious beliefs, ethnic origin, place of residence, veteran status, physical disability, health status, sexual orientation, or criminal record unrelated to present dangerousness. This is a personal commitment, as well as being required by federal, state, and local laws and regulations. I will always take steps to advance and support the values of equal opportunity, human dignity, and racial/ethnic/cultural diversity. If you believe you have been discriminated against, please bring this matter to my attention immediately.

Thank You

I truly appreciate the chance you have given me to be of professional service to you, and look forward to a successful relationship with you. If you are satisfied with my services as we proceed, I (like any professional) would appreciate your referring other people to me who might also be able to make use of my services.

YOUR RIGHTS AS A CLIENT IN COUNSELING

1. You have the right to be informed about the qualifications of your counselor including education, experience, professional counseling certification(s), and license(s).
2. You have the right to receive an explanation of services offered including methods of therapy, the techniques used, your time commitments, fee scales, and billing policies prior to receipt of services.
3. You have the right to be informed of the limitations of the counselor's practice to special areas of expertise (e.g. career development, ethnic groups, etc.) or age group (e.g. children, adolescents, older adults, etc.).
4. You have the right to participate in identifying problems, setting goals and evaluating progress toward meeting them.
5. You have the right to know who to contact in an emergency.
6. You have the right to request a second opinion or seek a referral for a second opinion at any time.
7. You have the right to request that copies of medical records and reports be sent to other counseling professionals.
8. You have the right to end counseling at any time. The only thing you will have to do is to pay for any sessions you have already had. You may, of course, have problems with other people or agencies if you end counseling – for example, if you have been sent for therapy by a court.
9. You have the right to ask questions about the counseling techniques and strategies and be informed of your progress.
10. You have the right to contact the appropriate professional organization if you have doubts or complaints relative to the counselor's conduct.
11. You have the right not to allow the use of any therapy technique. If your counselor plans to use any unusual technique, she will tell you and discuss its risks and benefits with you.

COMPLETE AND RETURN

Our Agreement

I, the client / guardian, have read, or have had read to me, and fully understand my rights / responsibilities detailed in this document. My signature below indicates that I have discussed those points I did not understand and have had my questions, if any, fully answered.

It is also my understanding that any of the points mentioned above can be discussed and may be open to change. If at any time during the treatment I have questions about any of the subjects discussed in this document, I can talk with this therapist about them and she will do her best to answer them.

I agree to abide by and act in accordance with the points covered in this document. I understand that by signing this agreement, I am acknowledging the circumstances under which Tamara G. Suttle, M.Ed., LPC is legally obligated to waive confidentiality.

I understand that after therapy begins I have the right to withdraw my consent to therapy at any time, for any reason. However, I will make every effort to discuss my concerns about my progress with you before ending therapy with you.

I hereby agree to enter into therapy with Tamara G. Suttle, M.Ed., LPC (or to have the client enter therapy) and to cooperate fully and to the best of my ability, as shown by my signature below. I understand that no specific promises have been made to me by this therapist about the results of treatment, the effectiveness of the procedures used by this therapist, or the number of sessions necessary for therapy to be effective.

> _____
Signature of client _____
Date

> _____
Printed name of client

> _____
Signature of person authorized to make medical decisions _____
Date

> Relationship to client:
 Self Parent Legal Guardian
 Health care custodial parent of a minor (less than 14 years of age)
 Other person authorized to act on behalf of the client

I, Tamara G. Suttle, M.Ed., LPC, have met with this client / guardian for a suitable period of time and have informed him or her of the issues and points raised in this document. To the best of my knowledge, I have responded to all of his or her questions. I believe this person fully understands each of the points in this document and I find no reason to believe this person is not fully competent and legally authorized to give informed consent to treatment at this time. I agree to enter into therapy with the client, as shown by my signature here.

Signature of Therapist _____
Date

Copy accepted by client / guardian

Copy kept by therapist