

Debbie Benschling

Clinical Social Worker
MSW ❖ LCSW ❖ MSWAC ❖ ACSW ❖ CHT

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Professional Services Contract

Confidentiality

All information shared in the counseling relationship is confidential. Federal law requires that information cannot be disclosed to anyone without your written consent. I have a duty to uphold your privacy. There are situations that allow or require exceptions to confidentiality. They are described in detail in my Professional disclosure statement under the client bill of rights section and in my communications policy. Insurance and other third party fee assistance generally requires the release of confidential information to pay for services. You can receive services without these consents however you must agree to release protected information for billing information to be sent to a third party and authorize consent for us to communicate via email or text.

Office Hours

I am generally in my office, 9-5 or 10-6, Monday through Thursday. There is no receptionist. However, there is confidential voice mail. I check messages frequently and will return calls as soon as I am available. There are times when responses are delayed. Please see my communications policy for details. On Friday I generally check messages once. General calls outside of business hours will be received by voice mail. Please see my communications policy for additional information. For urgent calls please see next section.

Emergency and urgent calls

ER coverage is provided for current clients only. For URGENT messages call 503-944-5032 and listen to the message for instructions on emergency coverage. Myself or the person covering for me will return your urgent call ASAP~ it may take several hours. If you are unable to wait for a return call, go to the nearest emergency room. Emergency calls longer than 15 minutes or any emergency call outside of usual business hours will be charged at your usual hourly fee. A reminder for any insurance clients: insurance companies do not pay for telephone calls. My communications policy covers this in more detail.

Appointments

Appointments are arranged directly with me. If you need to change or cancel an appointment 24-hour notification is required to avoid being charged. You will be charged for missed appointments or late cancellations. I generally do not charge for missed appointments due to illness. Insurance does not cover missed appointments or telephone sessions. Appointments are usually 50 minutes. Longer appointments can be arranged.

Electronic Communication:

I do accept limited communication through email and text message for routine communication. Urgent situations require a phone call however you can text to alert me to the need to speak with me. I cannot guarantee confidentiality for electronic communications. If you'd like to communicate through email or text you will need to sign a consent form. Please read my communications policy for full information on emergency and urgent calls.

Fees

The fee for counseling is \$125.00 for a 50-minute session or \$155.00 - \$165 for an extended session, 75-90 minutes. Payments must be made at the time of service unless other arrangements are made. I accept checks, money orders, some credit/ debit cards and cash. Courtesy discounts **do not** apply to credit / debit card transactions. If you have insurance that covers counseling, I can provide a statement or possibly bill your carrier for you. I generally require payment in full and your insurance company will reimburse you directly. Please ask if you have interest in billing information. All insurance requires a medical mental health diagnosis and some require treatment plan authorization to cover counseling services. Regardless of insurance or other third party assistance, you are 100% responsible for all fees. Basic letter and report writing will be charged at your customary fee based on the time spent. Any legal/court involvement on my part will be charged at a fee of \$180.00 per hour. Some administrative services have fees. Services that have additional fees will be discussed prior to agreeing to a service and fee. I offer a reduced fee program for clients who have financial difficulties, no third party help, and pay by cash/check for covering counseling fees. Proof of financial status may be required. I have a limited number of reduced fee appointment slots. Please see ER section for emergency service fees. For a full schedule of service fees please ask.

Our Agreed upon fee, payment plan, and services are:

I have read the information contained in this contract and have had an opportunity to ask questions. I understand it to my satisfaction and agree to participate in the services as described.

Client: _____ Client: _____ Date: _____

Counselor: _____ Date: _____