



Client Information Sheet

Welcome to the offices of **Dr. Bryan T. Duncan**, Psychologist. I am pleased you have chosen my office. I provide a variety of psychological services including individual psychotherapy, couples therapy, group therapy, family therapy, psychological assessment, professional consultation, and court-related issues (referred to as forensic psychology). I would like to acquaint you with the business aspects of my services as well as the confidentiality of our interaction, so that we may spend our time dealing with the psychological issues that have brought you to this office. It is important that I inform you that my practice functions under the umbrella of a group practice called **D & A Counseling**. If you have any questions about what this means, please do not hesitate to ask.

Psychological treatment can be difficult to explain. It is important to understand that while psychotherapy can be very beneficial for some individuals, couples, and families, it entails both effort and risks on the part of the client. Each person will be expected to examine and discuss his or her behaviors, experiences, beliefs, emotions, values, and relationships as a part of the counseling process. This process could include certain risks that may involve recalling unpleasant life events and experiencing intense feelings such as sadness, anger, fear, guilt, or anxiety. Other products of therapy may include becoming more aware of my feelings, values, and experiences, and experiencing changes in my relationships as a result of this awareness

Confidentiality

Under State and Federal laws, the records created as a result of your visit to my office are confidential and typically can be released to no one without your written consent, or, if you are a child or a person declared incompetent by a court, your parent or legal guardian. There are instances when I may be legally or ethically obligated to release information without your consents. These include:

- A. When required by law: I am required to report suspected child abuse or neglect, or abuse or neglect of an elderly or disabled person, to the appropriate government agency.
- B. Serious threat to safety: I will use or disclose your PHI if I determine that you or another person are at significant risk for harm. This PHI will only be disclosed to those who can help to protect those involved and prevent the danger.
- C. Cases of sexual exploitation by a therapist: According to Texas state law, I am required to report instances of sexual exploitation by a mental health services provider. I will use or disclose your PHI to report any instances of sexual exploitation from a previous therapist with whom you were a client. I will make every attempt to discuss this report with you prior to making the report.
- D. Court Order: I may also use or disclose your PHI as required by a court order, subpoena, or other legal proceeding. I may use or disclose this information when requested by State or Federal officials who are making requests related to national security. If you are under the custody of law enforcement, I may also use or disclose your information.

Session Fees

The initial assessment session usually lasts 60 minutes and is billed at \$100. After the initial session, the rate for individual psychotherapy is charged at \$60/hour. A therapy "hour" or "session" lasts from 40-60 minutes. Occasionally, an extended individual session (75-90 minutes) is required. It will be billed at \$120. Group therapy is charged at \$25 per person, per session. Group typically lasts 90 minutes. Couples and/or family therapy are billed at \$60 per session. If you have a scheduled appointment and you do not show up or cancel it with less than 24 hrs. notice, you are responsible for the entire cost of the session before our next appointment. I cannot bill insurance companies for services I do not provide.

I am currently accepting insurances for MEDICARE and TRICARE only. I am considered out of network as a provider with most insurance companies. Additionally, most insurance companies do have a rate at which they will reimburse. Upon request I can prepare a form that lists your session that you may submit to your insurance company on your own. My current rate is below that of the reimbursement rate that insurance companies pay. All payments for services are due at the time the service is provided. If I am billing you "later" for psychological service, you will be expected to pay the full charge on a payment schedule to which we have both agreed.

Any collateral contacts, i.e., phone or mail consultations with physicians, teachers, ministers, attorneys, family members, etc., lasting more than 10 minutes are billed at the hourly rate for individual or forensic services, whichever is appropriate. Letters you request I construct and send will also be billed at my hourly rate. Insurance will not be billed for these services.

My forensic or legal consultation services are billed according to a different fee structure. If these services are required, please let me know in advance. You will be given my forensic rate information sheet to read and sign. Services for which payment is more than 60 days delayed may be referred to a collection agency at my option.

If you have any questions regarding billing or payment procedures for services in this office, please discuss these matters directly with me. I believe it is important for you to understand the business aspects of your treatment as well as the psychological and health related circumstances of your treatment I hope this clarifies the business aspects of your treatment so that we can move forward in assisting you with the issues that have brought you to my office today.

Bryan T. Duncan, Ph.D.
Psychologist

I have read, understand, and agree to the above information and terms.

Name

Signature

Date