

Nothing Is Impossible Counseling, LLC

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Licensed Mental Health Counselor

Informed Disclosure Statement & Informed Consent for Treatment

Welcome to Nothing Is Impossible Counseling!

Prior to our first appointment, I invite you to review the following important information regarding my services. Please note any questions that you have in reading through this material, so we can discuss them at your first appointment. This document is intended to inform you of my policies, state, federal Laws, and your rights as a client. If you have other questions or concerns, please ask, and I will do my best to answer for you or direct you to another resource. I have earned a Master of Science Degree in Counselor Education from Palm Beach Atlantic University. I am licensed by the State of Florida as a Licensed Mental Health Counselor. I have been counseling in the field since 2007 in the 12-Step world in several programs and have a strong faith-based background of 40+ years. My husband and I have been married for over 40 years and have worked through multiple issues, raised five children and are now blessed with eight grandsons. I share this to communicate that due to my experience and training, I'm prepared to work side-by-side with you. Signing the Consent and Authorization form for treatment will represent an agreement between you and me and acknowledge that you feel adequately informed regarding the services and support you receive during your time in counseling.

Counseling

Counseling varies depending on the personalities of the counselor and client, and the particular issues you bring forward. Counseling and psychotherapy are the process of resolving problems by talking and working with a professionally trained person to help people achieve a more fulfilling life. The process of change will be unique to you. This process begins by clearly defining the problem and mutually deciding upon goals for therapy. I also use experiential methods that include tuning into feelings and working toward a corrective emotional experience. You may be asked to supply personal information about yourself and your family that may include (but is not limited to) information about the family in which you grew up, past events in your life, ways in which you communicate, addictive behaviors, and any substance use. There are many different methods I may use to deal with the problems that you hope to address. I often use biblically based concepts to guide my efforts to assist you, but I will not impose my beliefs on you. I may suggest supplemental books to facilitate the counseling process. I may also utilize prayer, scripture, inner healing strategies, CBT, Accelerated Experiential Dynamic Psychotherapy (AEDP) family systems strategies, Solution Focused Therapy, and Mindfulness among others.

In order for our work together to be successful, you will have to work on things we talk about both during our sessions and at home. Therapy and counseling can have benefits and risks. Since therapy often involves discussing difficult or challenging aspects of your life or past, you may find yourself experiencing intense emotions while in psychotherapy. Furthermore, you may encounter growth and change, which can affect relationships with others. On the other

hand, counseling has shown to be significantly beneficial to those who participate in it. Therapy can often assist individuals to find solutions to problems, improve self-image, reduce negative feelings, and improve relationship quality. There are no guarantees of what you will experience. If at any time during our counseling relationship you would like more information regarding therapeutic interventions, education, or general information please do not hesitate to ask. My license number is available by request; please ask me if you have any questions regarding my credentials or education, I'd be happy to supply them for you.

Video Recording of Sessions

Video recording is something I do to offer the best treatment possible to clients. Video recording is a tool that helps me to help you by being more present in the room, and it is like self-supervision. I can watch our session again to see what I might have done differently, or I can review it with a supervisor. Then it is like you have two therapists working on your behalf. Of course, the supervisor is bound by the same rules of confidentiality that I am to help me provide the most effective treatment I can. There is a separate form that you will sign if you are in agreement. You always have the choice to agree to recording in general, as well as to recording any given session. You can also ask to stop the camera any time.

Assessment & Sessions

Our initial session will include reviewing this consent form, an evaluation, and assessment of your needs. Afterwards, if both you and I agree to work with each other within the guidelines this informed consent provides, you will sign the consent form. After the initial session, I will be able to offer you some first impressions of what our work will include and a treatment plan to follow, if you decide to continue with therapy. If you choose to discontinue your sessions with me, I will need to close your case within four weeks, unless other arrangements are made with me.

Fees

Each session is scheduled for 55 minutes in length unless the client and I have agreed upon the longer session prior to its beginning. My fees currently are \$80.00 for a 55-minute session and \$120.00 for an 85-minute session. If local travel is necessary for the case, there will be a \$10.00 fee charged per session. If case management/consultation by phone needs to occur between sessions, the fee is \$1.46 per minute if the conversation by phone or in person is longer than three minutes. Frequency of appointments will be mutually agreed upon as part of your plan of care. Payment in cash, Venmo, Zelle, Square, VISA, Master Card, American Express, Discover, (if the card has a magstripe or chip) credit cards are accepted.

No Surprises Act/Good Faith Estimate

You may be aware that the *No Surprises Act* was recently passed late 2021 and became effective on 1/1/22 requiring all healthcare professionals (including counselors) to "to give uninsured and self-pay patients a good faith estimate of costs for services that they offer, when scheduling care or when the patient requests an estimate." The original bill was intended for emergency services and facilities like hospitals or clinics, which provide emergency services. Other undisclosed costs like physicians assisting in surgeries who are not in-network and emergency medical expenses like air ambulance (helicopter) services are to provide these estimates.

Counselors will be required to provide a "good faith estimate" if the client chooses detailing information such as diagnoses, anticipated costs of services, frequency/quantity of sessions, etc. Providing a diagnosis is near impossible before a session is scheduled, and for most therapists this is unfortunately needless work and time spent; however, it is your right under this law.

I do not file insurance, as I am a small private practice, yet the good faith estimate is still required to be offered to clients. It is a notification of charges for a scheduled/requested therapy. My fees are clearly stated in my *Informed Consent*, which a client would receive after we discuss your issues before our first session. As you read my "Fee" section, my fees and other costs like case management or consultation, a cost-effective service available for clients who may need to talk or get support between sessions are plainly listed there.

The information provided in the good faith estimate is only an estimate and is not binding. My fees do not change on a per session basis, unless I inform you ahead of time that I am raising my rates, you have the viable option to waive receiving this estimate.

Insurance

Currently, I do not file insurance. You may attempt third-party reimbursement. I am happy to supply a superbill for you to submit to your insurance provider; however, I do not guarantee reimbursement. Please be aware that if you request a summary or bill to submit to your insurance provider, it is likely that your insurance company will require you to authorize your therapist to provide them with a clinical diagnosis. In other cases, they may request additional clinical information such as treatment plans or summaries.

Cancellation Policy

Unless a scheduled appointment is cancelled at least 24 hours in advance (a Monday morning appointment must be cancelled by Friday morning) clients will be responsible to pay a late cancellation fee of one-half of the session fee. I do understand that circumstances beyond an individual's control can arise. In specific cases the fee may be waived at the therapist's discretion. Please understand that consistency in counseling and attending each session will provide you with the optimum potential benefit from your counseling experience.

Contacting Your Therapist & Office Hours

I am not often immediately available by telephone. While I maintain office hours by appointment only, I am often with clients and unable to answer the phone. When I am unavailable, your call will be answered by my voicemail, which I monitor frequently. I will make every effort to return your call within 24 hours or the next business day, with the exception of holidays. If you do not hear back from me in that time frame, please call back, as it may mean that your message was not retained by my voicemail. If you are unable to reach me and feel that you cannot wait for me to return your call, contact your family physician or the nearest emergency room.

If I will be unavailable for an extended time, I will provide you with the name of a colleague to contact, if necessary.

Information contained in email and text messages may be privileged and confidential. However, there is some risk that any information that may be contained in such email or text message may be disclosed to, or intercepted by, unauthorized third parties. Please be aware that email and text communication can be intercepted in transmission or misdirected. Your use of email or text to communicate information indicates that you acknowledge and accept the possible risks associated with such communication.

Social Media and Friending

I am pleased that you value your relationship with me, but I have found that there can be unforeseen and uncomfortable implications associated with mixing a professional counseling relationship with a personal relationship, and that this is now the recommended ethical course of action.

Professional Records

The laws and standards of my profession require that counselors keep treatment records of each session. This information can be requested in writing and will be provided to clients either in full or in summary. Records will be kept for seven years. This information is maintained in clinical language and is subject to misinterpretation and as a result, could be upsetting. If I believe this information is subject to high levels of misinterpretation, I may offer to review the records with you during a scheduled session. Because these records contain sensitive information, I strongly suggest clients reviewing them with a mental health provider.

Confidentiality

In general, the privacy of all communications between a patient and counselor is protected by law, and I can only release information about our work to others with your written permission.

Limits of Confidentiality

By Florida Law, the following are the only reasons confidentiality may be broken:

- 1) Immediate danger to you or someone else
 - 2) Report of abuse or neglect of a child, elderly person, or a disabled person
 - 3) Court order
 - 4) Report of unethical or illegal conduct by another mental health or medical professional.
- If any of these situations arise, we must give out enough information to try to keep people safe. If records are requested by you or by anyone else (including a court), a summary letter will be provided.

Some detailed examples are provided below:

- In most legal proceedings, you have the right to prevent me from providing any information about your treatment. In some proceedings involving child custody and those in which your emotional condition is an important issue, a judge may order my testimony if he/she determines that the issues demand it.

- There are some situations in which I am legally obligated to act to protect others from harm, even if I have to reveal some information about a client's treatment. For example, if I believe that a child [elderly person, or disabled person] is being abused, I am required to file a report with the appropriate state agency.
- If I believe that a patient is threatening serious bodily harm to another, I am required to take protective actions. These actions may include notifying the potential victim, contacting the police, or seeking hospitalization for the client.
- If the client threatens to harm him/herself, I may be obligated to seek hospitalization for him/her or to contact family members or others who can help provide protection. If you are considering suicide or believe yourself to be a potential safety threat to others, you must immediately call 911, (800) LIFE-NET and/or notify the police and/or seek emergency care at your local hospital.
- I may occasionally find it helpful to consult other professionals about a case. During a consultation, I make every effort to avoid revealing the identity of my patient. The consultant is also legally bound to keep the information confidential. If you don't object, I will not tell you about these consultations unless I feel that it is important to our work together.

While this written summary of exceptions to confidentiality should prove helpful in informing you about potential problems, it is important that we discuss any questions or concerns that you may have at our initial meeting. I will be happy to discuss these issues with you if you need specific advice, but formal legal advice may be needed because the laws governing confidentiality are quite complex.

Health care providers are legally allowed to use or disclose records or information for treatment, payment, and health care operations purposes. However, I do not routinely disclose information in such circumstances, so I will require your permission in advance, either through your consent at the onset of our relationship (by signing a general consent form below), or through your written authorization at the time the need for disclosure arises. You may revoke your permission, in writing, at any time by contacting me.

