

Grace for Life Counseling and Consulting Associates
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LIMITS OF CONFIDENTIALITY

Contents of all therapy sessions are considered to be confidential. Both verbal information and written records about a client cannot be shared with another party without the written consent of the client or the client's legal guardian. Noted exceptions are as follows:

Duty to Warn and Protect

In cases in which the client discloses or implies a plan for suicide, the health care professional is required to notify legal authorities and make reasonable attempts to notify the family of the client. In cases of threat to harm others the therapist may notify local authorities.

Abuse of Children and Vulnerable Adults

If a client states or suggests that he or she is abusing a child (or vulnerable adult) or has recently abused a child (or vulnerable adult), or a child (or vulnerable adult) is in danger of abuse, the mental health professional is required to report this information to the appropriate social service and/or legal authorities.

Prenatal Exposure to Controlled Substances

Mental Health care professionals are required to report admitted prenatal exposure to controlled substances that are potentially harmful.

Minors/Guardianship

Parents or legal guardians of non-emancipated minor clients have the right to access the clients' records. A parent/guardian signing this form on the behalf of a minor child is agreeing to treatment.

Insurance/EAP Providers (when applicable)

Insurance companies and other third-party payers are given information that they request regarding services to clients. Information that may be requested includes, but is not limited to: types of service, dates/times of service, diagnosis, treatment plan, and description of impairment, progress of therapy, case notes, and summaries.

Billing Company/Payments

Information is provided to an outside billing company for the purpose of filing claims. All claims not paid by an insurance provider are the responsibility of the client and is due 30 days after notification. If claims are left unpaid for 90 days a collection agency will be used to ensure payment of all monies due. The collection agency will only be provided the information allowed within ethical guidelines to be able to collect funds due.

I agree to the above limits of confidentiality and understand their meanings and ramifications.

Client Name

Client Signature (Client's Parent/Guardian if under 18)

Today's Date

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CANCELLATION POLICY

If you fail to show for an appointment, or do not cancel within the required 24 hours you will be billed a \$25 fee. The only exception will be for illness or an emergency. Emergencies will be considered on a case-by-case basis.

Insurance companies and some EAPs may not be billed directly for missed appointments; however you as the client are responsible for showing up for scheduled appointments and will be charged a \$25 fee. Our goal is to ensure that all of our clients are able to receive the services they need.

Thank you for your consideration regarding this important matter.

Client Name

Client Signature (Client's Parent/Guardian if under 18)

Today's Date