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OFFICE POLICIES, CONSENT FOR TREATMENT, AND GENERAL INFORMATION

Welcome! The following information will acquaint you with some of my policies and procedures. I am a Clinical Psychologist licensed (#1444) by The Board of Examiners in Psychology in the State of Alabama.

It is my policy to ensure fair and equal treatment in all services and practices to all people, regardless of sexual orientation, gender, race, color, ancestry, religious creed, national origin, physical handicap, medical condition, age, or marital status.

APPOINTMENTS: A counseling "hour" is 45 minutes. Psychotherapy is not like a medical doctor visit. Instead, it calls for a very active effort on your part. In order for the therapy to be most successful, you will have to consider the things we talk about both during and between our sessions. The time we agree to meet becomes your time- reserved only for you. Filling that time on short notice due to a cancellation is difficult. Therefore, if you need to cancel an appointment, you are asked to call at least 48 hours in advance. Please be aware that late cancellations or "no-shows" cannot be billed to insurance companies. Therefore you are financially responsible for late cancellations and no-shows. Please know I'll make every reasonable effort to accommodate schedule changes as I'm able.

CONFIDENTIALITY: Good clinical practice requires written records of services provided to clients. Maintenance of these records help assure you of a consistent quality of care. All information disclosed in sessions and the written records pertaining to those sessions, are confidential and may not be revealed to anyone without your (client's) written permission, except where disclosure is required by law:

(a) Suicidal Action: If it is clear to me that you are ready (in the immediate future) to commit a suicidal act, I am required by law to inform the police and/or emergency paramedics who will arrive and intervene to maintain your safety. Such a call would not be a surprise to you. I will tell you of my concern and potential action, unless time and the circumstances did not allow it. You can discuss any aspects of suicide without triggering this break in confidentiality. Feel free to talk about suicidal thoughts, dreams, wishes, unges or plans without worry that paramedics or police will be called.

(b) Danger to Others: If it is clear to me that you have an intention to harm a specific person whom you have named or identified, and you have a plan on how to harm that person, I am then required by law to notify the police and take reasonable steps to warn the intended victim.

(c) Unable to Care for Yourself (Gravely Disabled): If it is clear to me that you are unable to take basic care of yourself and maintain your safety, then I am required to alert paramedics and/or police that you are "gravely disabled" and may need to be hospitalized for up to 3 days. This situation rarely happens. A client is considered "gravely disabled" if, for example, he/she cannot feed him/herself, might walk into traffic, doesn't know where he/she is or how to get home, or is having similar major problems in basic functioning.

(d) Child Abuse/Elder Abuse: If during the course of your treatment you mention that you were physically or sexually abused by an adult, that you know the details of some current physical or sexual abuse of a child or elder, or you are yourself the perpetrator of abuse, and you have provided both the name and address of the victim and/or perpetrator of that abuse, then I am required by law to file a report with the Department of Social Services.

(e) Legal Subpoena/Court Order: Clinical records are occasionally subject to legal subpoena. In those unusual instances, I am not obligated and will not produce the record without your express written consent — I will claim confidentiality. If a subpoena is to be responded to, your express written consent will be required. If records are the subject of a legitimate Order of the Court, release of the records or a summary of the records may be required whether or not the consent is given.

[Please understand that these situations rarely happen during the treatment process, and that the breaking of confidentiality and the communication of private information to outside authorities is done only in the above extreme and urgent situations.]

If you are under 18 years of age, please be aware that the law may provide your parents the right to examine your treatment records. It is my policy to request an agreement from parents that they agree to give up access to your records. If they agree, I will provide them only with general information about our work together, unless I feel there is a high risk that you will seriously jeopardize or harm yourself or someone else. In this case, I will notify them of my concern. Before giving them any information, I will discuss the matter with you, if possible, and do my best to handle any objections you may have with what I am prepared to discuss.

Your Rights Regarding Information in Your Medical Record

Right to Inspect and Copy

You are entitled to receive a copy of your medical record unless I believe that receiving that information would be emotionally damaging. Because these are professional records, they can be misinterpreted and/or upsetting to untrained readers. If you wish to see your records or receive a copy of your records, I require written notice to that effect, and I would expect to discuss your request with you in person. If I deny you access to your records, you can request to speak with an independent colleague of mine about your request. Your request for independent review should also be made in writing. If you are provided with a copy of your medical record information, I may charge a fee for any costs associated with that request.

Right to Amend

If you believe that the information I have about you is incorrect or incomplete, you may ask me to amend that information. It is my practice to accept this sort of request in writing, and that any information you may wish to add to your record also be provided to me in written form.

Right to an Accounting of Disclosures

You have the right to request an “Accounting Of Disclosures.” This is a list of the disclosures I have made of your medical record information. That information is listed on the *Authorization To Release Information*, and will be provided to you at your written request.

Right to Request Restrictions

You have the right to privacy, and to request a restriction or limitation on the health information we use or disclose about you for treatment, payment, or health care operations. As noted above, I will not release your confidential information without your written permission, unless mandated by law. Any restrictions to your *Authorization To Release Information* should be specified on the *Authorization*.

Right to Request Confidential Communications

You have the right to request that I communicate with you only in certain ways. For example, you can ask that I not leave a telephone message for you, or that I only contact you at work or by mail.

Complaints Regarding Privacy Rights

If you believe your privacy rights have been violated, you may file a written complaint with me, or with an independent colleague of mine, the Alabama Board of Psychology, or with the Secretary of the Department of Health and Human Services in Washington, D.C. You will not be penalized for filing a complaint. You have the right to a paper copy of this document, and you

will be offered one when you sign the original for your medical record. I reserve the right to change my policies as outlined herein. If they change, you will be informed of that change and you will be provided with a copy of the current document if desired.

PAYMENTS & INSURANCE REIMBURSEMENT: My hourly fee is \$200. In some circumstances this may be adjusted to the individual's ability to pay, upon mutual agreement. If you are using insurance in this treatment, I subscribe to the fee schedule set by your insurance company. In addition to regular appointments, I charge this amount, or the amount agreed upon, for other professional services you may need, though I will break down the hourly cost if I work for periods less than one hour. Other services may include report writing, extended telephone conversations, attendance at meetings with other professionals you have authorized, preparation of records or treatment summaries, and the time spent performing any other service you may request of me. If you become involved in legal proceedings that require my participation, you will be expected to pay for my professional time. I generally bill once a month, but you are free to pay per session if you wish. Please notify me if any problem arises during the course of therapy regarding your ability to make timely payments. For insurance plans, I generally will process a claim on your behalf for services rendered. For insurance plans, (usually those with which I'm not a participating provider), charges are billed to the client, and then I will provide you with a monthly bill which you can submit to your insurance company for reimbursement. Not all issues/conditions/problems which are the focus of psychotherapy are reimbursed by insurance companies. It is your responsibility to verify the specifics of your coverage. If your account is overdue (unpaid), and there is no agreement on a payment plan, I can use legal means (court, collection agency, etc.) to obtain payment. Such actions would be as a last resort and would come as no surprise to you.

Contacting Me

I am often not immediately available by telephone. While I am usually working Monday through Friday between 7:00 a.m. and 5:00 p.m., I probably will not answer the phone when I am with a patient. I monitor my voicemail system frequently. I will make every effort to return your call as soon as possible, with the exception of weekends and after hours. In emergencies, you can attempt to reach me at my office number and leave an appropriate message. However, if you feel that you cannot wait for a return call, you can contact the Crisis/Suicide Hotline 24 hours a day at 205-323-7777 or go to the nearest emergency room and ask for the psychologist or therapist on call. If you are in a medical emergency, call 911. A helpline for kids runs from 3:00 p.m. – 10:00 p.m. and is 205-328-5437. A helpline for Seniors is 205-328-8255. If you need general social service information, you can contact the Mental Health Association at 205-933-9393 or the Dept. of Human Resources at 205-918-5100. If I will be unavailable for an extended time, I will provide you with the name of a colleague to contact, if necessary.

Your signature below indicates that you have read the information in this document and agree to abide by its terms during our professional relationship.

Signature: _____ Today's Date: _____

Print Name