

Karmyn Vaughn LICSW
Mill House Counseling
4 Back River Rd. Dover, NH 03820
(603)-742-1373
karmynv@aol.com

CONSENT FOR SERVICES

CONFIDENTIALITY: Information disclosed in therapy is confidential and will not be revealed to anyone outside Karmyn Vaughn LICSW without your written permission except where disclosure is permitted by law. Exceptions to confidentiality: when there is reasonable suspicion of child or elder abuse, the client presents a serious danger to self or others or pursuant to a lawfully issued subpoena.

MINORS: the parent or guardian holds the legal privilege regarding release of information.

GROUPS: group therapy clients are expected to honor the confidentiality of other group members.

CANCELLATIONS: There is a 24 hour cancellation fee. **A \$50.00 fee will be charged for missed therapy sessions not cancelled 24 hours before the appointment time.**

EMERGENCIES: In the case of emergencies, contact Karmyn Vaughn LICSW at (603)-742-1373 Ext. 116. Leave your full name and number. Depending on the emergency, you should contact 911 regarding your emergency situation immediately.

In the event that your condition does not allow you to request needed medical assistance, Karmyn Vaughn LICSW reserves the right to contact a medical practitioner of her choice.

PAYMENT FOR SERVICES: Your insurance copay as determined by your insurance coverage is due prior to your session. It is your responsibility to confirm mental health eligibility with your insurance. It is recommended that you do so prior to your first session. Inform Karmyn Vaughn LICSW of the number of sessions you are eligible for. Sessions are 45 minutes unless other arrangements have been made with Karmyn Vaughn LICSW. Phone sessions are available and are a private pay service if needed-\$50 per half hour, \$100 per hour. Unless Karmyn Vaughn LICSW is a provider with your insurance carrier, services are charged directly to the client, not to the insurance company. **Please note new insurance policies purchased privately often have high deductibles and/or do not provide mental health benefits.** Inquire with your insurance company if you have met your deductible and have mental health benefits as you will be responsible for the full insurance fee if these requirements are not met. I offer a sliding scale fee for private pay clients that are in need of therapy but are unable to utilize insurance.

BILLING RELATED INFORMATION/POLICIES: Clients are not to accrue an unpaid balance of more than two sessions. Unpaid balances will be submitted to a collection agency or a small claims court. If you are on a sliding scale payment fee, it will be reviewed biannually. Written consent by the client must be obtained before accepting payment by a person other than the client by Karmyn Vaughn LICSW. In order to safeguard confidentiality, I may ask for proof of identity when I am approached for client related information. There is a \$10 nonrefundable fee for each non-sufficient fund check. The repayment must be in cash or money order only after a (NSF) check and thereafter. Karmyn Vaughn LICSW is a sole proprietorship and is not affiliated with any other partnership or company.

RECORDS: All client records are maintained confidentially in storage upon your termination with therapy.

I understand and fully accept the conditions as stated in this consent.

Client/ Parent/Guardian printed name

Date

Date of Birth