



## The Morris Guild of Psychotherapy

BE WHO YOU ARE

14 Ridgedale Ave., Suite 207, Cedar Knolls, NJ 07927

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Group NPI#: 1821239948 EIN#: 26-4238679

### **CONSENT FOR TREATMENT AND OFFICE POLICY**

This consent is to certify that you (client) give permission to the clinical staff at The Morris Guild of Psychotherapy, LLC. to provide psychotherapy treatment.

You have a right to terminate the therapeutic relationship at any time without fault.

#### **CONFIDENTIALITY**

Under most circumstances, all communication between you and your therapist is confidential, unless permission is given by you to convey information to a third party outside of The Morris Guild of Psychotherapy, LLC.

Please be advised there are certain exceptions to confidentiality:

If you pose a threat of serious bodily harm to yourself or identifiable third-parties, we are obligated by New Jersey law (NJSA 2A:62A-16), to breach confidentiality by alerting law enforcement and are authorized to take additional steps as specified in that statute.

- In the event of a psychiatric hospitalization.
- If you report information indicating that a child, disabled, or elderly person is suffering abuse or neglect.
- If a court order, issued by a judge, which could require us to release information contained in your records, or could require a therapist to testify.

If appropriate, your counselor may consult with your treating physician or other healthcare provider to coordinate your care. You will have to sign a release of information form for this to occur unless you are determined a danger to self/other.

#### **CONTACTING THERAPISTS**

You may email your therapist at any time. Please be aware that therapists may not retrieve messages until their regular office hours.

**If you have a life-threatening emergency, dial 911.**

It is impossible to guarantee the confidentiality of email or text messaging content.

By signing below, you grant The Morris Guild of Psychotherapy, LLC. permission to email and text you.

You acknowledge the risks and release The Morris Guild of Psychotherapy, LLC. therapists from liability for the risk to your confidentiality.

Emails and texts should be limited to administrative issues such as scheduling or billing questions.

The Morris Guild of Psychotherapy, LLC. and its therapists do not accept friend requests from clients on Facebook, LinkedIn or other social media websites.

## **APPOINTMENTS**

Sessions are 50-60 minutes for individual clients, 90 minutes for couples, and 120 minutes for group therapy and begin at the scheduled appointment time. If you arrive late, your session will be shorter. If your therapist arrives late, your session will be extended to make up the time. If you must cancel a session, please let your therapist know at least 24 hours in advance. **You will be responsible for the full fee of any session cancelled with less than 24 hours notice.**

For psychotherapy to be most effective, clients must not be under the influence of intoxicating substances.

If your therapist feels it necessary, you may be asked to reschedule your appointment for another time; this will be considered a late cancellation.

## **FEES, BILLING & PAYMENTS**

All services are billed at the standard rate. Clients pay for services at the end of each session, unless other arrangements have been made. Please notify your therapist if any problems arise that affect your ability to make timely payments.

If document preparation is required (e.g. legal proceedings, insurance appeals), clinicians reserve the right to bill for services at 100% of full fee.

In order to prevent any misunderstandings about payment for services, please be advised of the following:

- (1) All services provided are billed directly to the client unless other arrangements have been made;
- (2) Clients are personally responsible for payment at time of service via cash, credit card, check or money order;
- (3) Statements can be provided for you to submit for insurance reimbursement;
- (4) You are responsible for submitting all claims to your insurance provider;
- (5) If payment is not received when services are rendered, payment will be your responsibility as the client.
- (6) If your credit card is invalid and you have made no other payment arrangements, your past due balance may be sent to an agency for collection.

If you commit to group therapy, the weekly fee for group sessions is due even if you do not attend.

**I have read, understand and agree to the information, guidelines and office policies stated above.**

Signature \_\_\_\_\_ Date \_\_\_\_\_  
Printed Name \_\_\_\_\_ Date of Birth \_\_\_\_\_