

Elena Storer, MFT, PhD
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Informed Consent

FEES, PAYMENT: My fee is \$185.00 per 60-minute session. *Payment is due at the time of service.* Cash, check and online payments are accepted. I raise my fees \$10 at the beginning of each year.

INSURANCE: I am only a network provider with MHN. I will file the claim to MHN and bill you for any co-pay or deductible for which you are responsible. If there is a balance unpaid by insurance, either a co-pay, deductible or non-covered service, you are responsible for that amount and I will bill you for that amount.

If you have other insurance than MHN, you will need to pay me for your session at the time of service and then file a claim with your insurance company on your own. I can provide you with a superbill at your appointment to do that. Every insurance carrier is different in their coverage, so I encourage you to contact your insurance carrier to find out at what rate your visits are reimbursed.

Please be aware that insurance companies require me to provide a clinical diagnosis that will be part of a computerized permanent health record. Although insurance companies claim to keep this information confidential, once it is in their hands, I have no control over what they do with it.

COORDINATION OF CARE: If your case requires coordination of care with other agencies, physicians, therapists, treatment programs, schools or attorneys, I will bill you for the time I am required to work on your behalf. I will let you know in advance if these requests are being made of me, or if I find it necessary to contact another provider. I generally do not bill for brief consultations of 10 minutes or less. Otherwise, I bill at the rate of \$175 per hour. This would include any written documents that I need to provide and travel time, if required.

APPOINTMENTS AND CANCELLATIONS: The scheduling of an appointment involves the reservation of time specifically for you. All appointments are 60 minutes in length unless other arrangements have been made. You may cancel an appointment with no charge by calling 24 hours or more in advance of the scheduled appointment. Cancellations fewer than 24 hours in advance and no-shows will be charged \$185.00. This fee is not reimbursed by insurance companies. All efforts should be made to reschedule a missed appointment within the same week to help maintain continuity of care.

CONFIDENTIALITY: All information disclosed in sessions is confidential and may not be revealed to anyone without written permission from you, except where disclosure is permitted and required by law. Disclosure may be required in the following circumstances:

1. When there is a reasonable suspicion of child abuse or abuse to a dependent or elder adult
2. When the client communicates a threat of bodily injury to an identifiable person(s)
3. When the client is suicidal
4. When disclosure is required pursuant to a legal proceeding

Confidentiality with Regard to Email and Text Communications

Email and text messaging are not secure forms of communication. Emails and texts can be intercepted by third parties. I understand that if I use email or text to communicate with Elena Storer, MFT, PhD to discuss anything more than a scheduling issue, that I am taking the risk that the email or text might not be secure and could be intercepted. Elena Storer, MFT, PhD, requests that clinical information be handled through phone communication.

If you use email or text to communicate with Elena Storer, MFT, PhD, you are accepting these risks.

CONTACT BETWEEN SESSIONS: If you need to contact me between sessions, you may leave a message on my voicemail and I will return your call as soon as possible. I do check my voicemail several times a day, but I cannot always get back to you right away. When I am out of town or otherwise unavailable, a qualified professional will cover for me. I will leave the number on my voicemail. You may also contact me by email: elenastorer7@gmail.com.

I HAVE READ AND UNDERSTAND THESE OFFICE POLICIES AND CONSENT TO THESE TERMS AND TREATMENT:

Signature: _____ Date: _____