

Kathryn J. Cann, MSW
Licensed Clinical Social Worker
#LCS 15144

Welcome! I hope you find our time together worthwhile. This outline of my policies should answer some initial questions you may have.

1. Fees

For many years the standard psychotherapy session has been 50 minutes in duration. However, effective January 1, 2013, the American Medical Association (AMA) made changes to the Current Procedural Terminology (CPT) codes. Now the most frequently used codes for psychotherapy are as follows:

- 45 Minute Session: 90834 (38-52 minutes)
- 60 Minute Session: 90837 (53+ minutes)

My regular rates for these codes are \$100, and \$133 respectively and sessions are approximately 45 or 60 minutes in duration. My preference is for sixty minute sessions whenever possible, especially for EMDR. This works fine with many insurances (MediCare, Anthem, and MHN) however, some insurance plans (Magellan, United Behavioral Health, United Healthcare and most EAPs) are not covering the 90837 code. If you would like to upgrade to the 60 minute session as a “non covered service” the additional fee will be prorated based on the contract I have with your carrier and added to your existing copayment. Usually it’s about \$20. We can discuss these options at your initial session if you wish.

I am happy to bill your medical insurance or Employee Assistance Program (EAP) as a service for you. However, you are responsible to determine what is covered, and will be responsible for the bill if your insurance company denies payment for non covered services. Please discuss any concerns you may have about fees with me at any time. Make your checks payable to “K. Cann, LCSW”. Payment is expected at the beginning of each session unless prior arrangements have been made. It is helpful if you have your check written when you come into the session so that we can minimize use of your therapy time for business transactions.

2. Appointments/Cancellation Policy

The scheduled time that has been reserved is your time. If you don’t use the time the regular fee will be charged (or the rate I have contracted with your insurance carrier) unless you cancel the appointment 24 hours in advance. It’s a policy that I often hate to enforce, but find that I must hold to it consistently. Insurance companies don’t pay for broken appointments, late cancellations or appointments less than 16 minutes in duration. In the event that you arrive late and only a portion of the scheduled time can be billed, you will be responsible for the balance as a non covered service. If you choose to commit to a standing appointment time with me, you are encouraged to keep changes and cancellations to a minimum.

3. Confidentiality

By law you have the right to confidentiality and I, as therapist, am prohibited from revealing to any other person what you have said to me without your written permission. There are some circumstances in which your right to privacy by law must be set aside without your permission:

a. If I have knowledge that you are suffering from any wound or injury inflicted by a deadly weapon or as a result of assaultive or abusive conduct, I, by law, must make a report to local law enforcement.

b. If I believe, from the information you disclose, that you intend to perpetrate violence upon an identifiable victim(s), I, by law, must notify local authorities and the person(s) in danger.

c. If you (or someone representing you) introduces your emotional condition into legal proceedings, your right to privileged communication is automatically waved and I could be court ordered to testify or release information.

d. I am legally required to breach confidentiality when I have knowledge or "reasonable suspicion" that child abuse/neglect or elder abuse has occurred. I also have an ethical responsibility to report abuse of dependent adults.

If I determine that you are dangerous to yourself or to others or are gravely disabled, I have an ethical responsibility to intervene in order to see that you receive adequate care.

Further, when you request that your insurance be billed, they will require disclosure of information.

4. Gold River Christian Counseling Associates (GRCCA)

I am a member of GRCCA, an unincorporated association, for purposes of identification and advertising. The licensed therapists in GRCCA operate our counseling practices as sole proprietors. We are each responsible for our own business and have no responsibility for the business activities or clinical practices of any other licensed therapist in the office suite. I am responsible only for any interns that I employ.

5. Emergencies

You are free to leave me a voicemail at 916.812-2989. However, I do not carry a pager and am therefore not available for emergencies. It is important that you are aware of this in choosing to work with me. In case of an emergency please call Suicide Prevention at 916.368-3111 or 916.773-3111 or call Sutter Center for Psychiatry at 916.386-3077. You may also dial 911 or go to the nearest emergency room.

6. Feedback

Psychotherapy is a growth process between the therapist and client. I need to hear about how the process is going for you. Questions about methods, comments or concerns are welcome and encouraged. Open and honest communication is a vital part of the therapeutic process.

And one final note: For everyone's comfort, please refrain from conversation in the corridor outside the counseling offices and do not leave young children unattended in the waiting area. Again, welcome and I hope your time here will be helpful.

I have read and agree to the policies discussed above, and hereby consent to begin treatment services.

Signature: _____

Printed Name: _____ Date _____

Client Name (If different from above): _____