

Client-Therapist Agreement

Welcome to my practice! When a new client begins therapy with me, I provide them with this agreement to explain some of the ground rules, how I work, and how the therapeutic process may evolve. This is intended to provide important information to you regarding your treatment. I encourage you to read the entire document carefully and to make note of any questions you may have.

Therapy with Me:

The therapeutic approach that I use is best described as integrative psychotherapy. I use a combination of various therapeutic methodologies and techniques depending upon a client's unique challenges and specific goals. I offer a highly personalized approach, tailored to each of my clients' individual needs. As an interactive, solution-focused therapist, my treatment approach is to provide support and practical feedback to help clients address current life challenges and long-standing issues. With compassion and understanding, I help individuals find resolution to a wide range of personal concerns and psychological issues. Because my approach is collaborative, at its core, I invite feedback from my clients and encourage them to openly share their experiences related to their progress and our sessions together. Please question me, early and often! It is my belief, that our ability to collaborate and forge a safe therapeutic relationship is the key to a successful outcome.

Meetings:

My initial intake session for individuals, is 90 minutes. Subsequent sessions are typically weekly and 60-minutes in length. All couples therapy sessions are 90 minutes in length. A client may request an extended session or increased frequency of sessions. This request will be discussed and mutually determined. Upon request, and with advanced scheduling, therapy sessions by phone can be arranged when you travel, or a personal emergency precludes your ability to attend session in-person. Fees are the same for both in-person and telephone sessions. Video sessions are also available for established clients, and regular session fees apply.

Missed and cancelled sessions pose some issues for both the client and the therapist. First, the work of psychotherapy can be challenging, and when we hit a difficult place together it can feel easier to avoid coming in for treatment. I would urge you to fight that reluctance, come to therapy and engage in intentional discussion about your concerns. Additionally, I hold your scheduled appointment specifically for you and you alone. In order to ensure that each client receives the focus and attention they deserve, I keep the number of clients I see very limited. It is very difficult for me to fill your last minute cancelled appointment on short notice. As such, I have a 24-hour

Insight to Action LLC

Tanisha M. Ranger, PsyD, CSAT

Augusta Park Complex | 1481 W. Warm Springs Rd, Suite 132 | Henderson, NV 89014

dr.ranger@insighttoaction.net | 484.483.3093 | www.insighttoaction.net



Client-Therapist Agreement

notice of cancellation policy and I charge the full session fee for both late arriving clients and sessions missed without a 24-hour cancellation notification. If we are able to agree upon another time within the week that works for us both, I will allow you to reschedule at no extra fee. When possible, an earlier cancellation notice is appreciated. If you are running late, please phone or email me as soon as you can, to let me know. If I do not hear from you by 20 minutes into your session, I will call to check on you and may assume that you do not plan to attend your session. Please note: if you arrive late for your appointment, the session will still end its regular time.

Fees and Payment:

Individual Initial Intake session ~ \$200

Individual therapy session ~ \$175

Couples Initial Intake session ~ \$250

Couples therapy session ~ \$225

Returned Check fee ~ \$50

Payments are due at the beginning of the session. Payment for service rendered may be made by cash, checks or debit/credit card. Cash payments need to be the exact amount since change cannot be given. Any overpayment can be applied to future sessions. Checks should be made payable to “Insight to Action LLC”.

In addition to appointments, I charge for other professional services, which are prorated. Other services include: report writing, telephone conversations that do not pertain to scheduling, attendance at meetings with other professionals you have authorized, and the time spent performing any other service that you request from me. Psychological testing services are an additional charge depending on the number and the test(s) administered. However, once we have been working together for one month, I will refer you to a colleague for psychological testing in order to maintain the therapeutic relationship.

I reserve the right to periodically adjust this fee, and you will be notified at least thirty days in advance of any fee adjustments. I do not permit clients to carry a balance of more than two sessions. If you are unable to pay this balance, we will discuss whether it makes sense for you to pause your care, so that you can avoid incurring more debt. Please let me know if any problem arises during the course of treatment regarding your ability to make timely payments. If accounts become delinquent (past due 30 days) I will begin collection procedures. I will attempt to contact you directly. If your account remains delinquent (past 90 days) an outside collection agency may

Insight to Action LLC

Tanisha M. Ranger, PsyD, CSAT

Augusta Park Complex | 1481 W. Warm Springs Rd, Suite 132 | Henderson, NV 89014

dr.ranger@insighttoaction.net | 484.483.3093 | www.insighttoaction.net



Client-Therapist Agreement

be used and / or small claims court action taken. In such cases, non-clinical information (as given on the Client Information form) may be released to assist in the collection of the amount due. Client will be responsible for all court and legal fees incurred if above action is necessary.

Insurance:

I am not currently on under contract with any insurance companies. As I am a licensed psychologist, you can seek reimbursement for our sessions from your insurance carrier. I generally do not have any direct contact with your insurance carrier. I am considered an out-of-network provider. To determine if you have mental health coverage, the first thing you should do is contact your insurance provider and ask about your mental health coverage and whether you have “out-of-network benefits.” They may require pre-authorization before they provide reimbursement. It is your responsibility to contact your health plan to request that they open an authorization for my services. Be aware that some plans will not “retro-authorize,” or approve services if you call after you have already begun receiving services. I will supply my clients a monthly receipt, which contains all the necessary information for insurance companies. Clients then submit the receipt to their insurance company for direct reimbursement. You are responsible for payment of my fees regardless of whether or not your insurance company reimburses you.

Other important questions to pose to your insurance carrier are: (1) do you have a deductible, and if so, how much; (2) how many sessions will they pay for; (3) what percentage of the per-session-fee will they pay for; (4) will they need a diagnosis in order to authorize reimbursement, and if so, will they keep that information confidential or will it be transmitted to future insurance companies should you ever change plans. Many people choose not to submit claims for treatment due to difficulties with insurance carriers. There is no guarantee that you will be fully reimbursed for our work together.

Contacting Me:

I am accessible via telephone, email and post. Messages may be left at (484) 483-3093 and will be promptly returned if requested, within 48 hours. If you are difficult to reach, please inform me of times when you will be available. Email messages should be focused on scheduling and appointment issues. I do not use email for client communication regarding therapeutic concerns due to the inherent lack of confidentiality involved. If you are calling to reschedule an appointment, it is helpful if you state the days and times that would best accommodate your needs. In the event of an emergency, when a client may be feeling unsafe or requires immediate medical or psychiatric assistance you should call “911” or go to the nearest hospital.

Insight to Action LLC

Tanisha M. Ranger, PsyD, CSAT

Augusta Park Complex | 1481 W. Warm Springs Rd, Suite 132 | Henderson, NV 89014

dr.ranger@insighttoaction.net | 484.483.3093 | www.insighttoaction.net



Client-Therapist Agreement

Confidentiality:

I have both a legal and ethical duty to ensure that what a client and I talk about remains confidential. There are however, exceptions to confidentiality. If I have any reason to believe that a child, elderly person, or a dependent adult is being abused or neglected, I am legally obligated to disclose such information to appropriate agencies. “Mandatory reporting statutes” leave me no room for discretion. In those situations, I must convey my concerns to the requisite authorities. Additionally, I am obligated to break confidentiality when a client presents a physical danger to self or the person or property of another. In this event, I generally prefer to discuss this matter with the client first; it is my preference to make any such disclosures with my client’s full knowledge; however, the discourse of a disclosure remains at my discretion.

If there is an emergency during our work together or after termination, in which I become concerned about your personal safety, the possibility of you injuring someone else, or about you receiving psychiatric care, I will do whatever I can, within the limits of the law, to prevent you from injuring yourself or another, and to ensure that you receive appropriate medical care. For this purpose, I may contact the person whose name you have provided on your Client Information Form.

If you choose to seek reimbursement through your health insurance carrier, disclosure of your confidential information may be required to process your claim. Only the minimum necessary information will be provided, including diagnosis, the date and length of appointments, and what services were rendered. Often, the billing statement I provide you and your company’s claim form are sufficient. However, sometimes treatment summaries or progress towards goals are also required. Unless explicitly authorized by you, psychotherapy notes will not be disclosed to your insurance carrier. While insurance companies claim to keep this information confidential, I have no control over your information once it leaves my office. Please be aware that submitting a mental health invoice for reimbursement carries some risk to confidentiality, privacy and/or future eligibility to obtain health or life insurance.

I will not voluntarily participate in any litigation or custody dispute in which my client and another individual, or entity, are parties. I have a policy of not communicating with my clients’ attorneys and will not write or sign letters, reports, declarations, or affidavits to be used in clients’ legal matters. I will not generally provide records or testimony, unless I am compelled to do so. Should I be subpoenaed, or ordered by a court of law, to appear as a

Insight to Action LLC

Tanisha M. Ranger, PsyD, CSAT

Augusta Park Complex | 1481 W. Warm Springs Rd, Suite 132 | Henderson, NV 89014

dr.ranger@insighttoaction.net | 484.483.3093 | www.insighttoaction.net



Client-Therapist Agreement

witness in an action involving a client, client agrees to reimburse me for any time spent for preparation, travel, or time in which I make myself available for such an appearance at my usual and customary rate of \$175 an hour.

Termination:

There are occasions when I may have to terminate therapy. Reasons for termination include, but are not limited to, untimely payment of fees, failure to comply with treatment recommendations, conflicts of interest, failure to participate in therapy, client's needs are outside of the therapist's scope of competence or practice, or client is not making progress in therapy. You, as the client, have a right to terminate therapy at your discretion. If either of us decides to terminate therapy, I will generally recommend that you participate in one, or possibly more termination sessions. These sessions are intended to facilitate a positive termination experience and give both parties an opportunity to reflect on the work that has been done. If you desire another therapist, I will also try to facilitate your transition by offering referrals.

Complaints:

If you have a concern or complaint about your treatment, I urge you to discuss it with me. I will take your concerns seriously and respond with care and respect. If you believe that I've been unwilling to listen and respond, or that I have behaved unethically, you can contact the Board of Psychological Examiners, which oversees licensing, and they will review the services I have provided.

State of Nevada Board of Psychological Examiners

4600 Kietzke Lane, Bldg B-116

Reno, NV 89502

Phone: (775) 688-1268

Email: nbop@govmail.state.nv.us

Insight to Action LLC

Tanisha M. Ranger, PsyD, CSAT

Augusta Park Complex | 1481 W. Warm Springs Rd, Suite 132 | Henderson, NV 89014

dr.ranger@insighttoaction.net | 484.483.3093 | www.insighttoaction.net

