Yukiko Hartman Psychotherapy Yukiko Kawabata Hartman, MS, LMHC, LPCC 4079 Governor Dr #3002 San Diego, CA 92122, (206) 715-0291

## Informed Consent for Clinical Services

Welcome to my practice. Please read this entire document carefully as it contains important information regarding my professional services, office policies, and general information agreement. Be sure to ask me questions you may have concerning its contents.

## My Education & Training

I am a Licensed Professional Clinical Counselor (LPCC 3885) in the State of California and the focus of my work is individual psychotherapy for adult clients. I hold a Master's degree in Counseling and Counselor Education from Indiana University, Bloomington. I am also a Licensed Mental Health Counselor in the State of Washington (LH 60182354) and a National Certified Counselor (NCC 74885). I provide psychotherapy and counseling in English and Japanese and have over ten years of professional experience working with diverse populations in the US and Japan.

# Therapeutic process and what to expect from therapy

Participation in therapy can result in a number of benefits to you, including improving interpersonal relationships and resolution of the specific concerns. Working toward these benefits requires your active involvement, honesty, and openness in order to enhance your thoughts, feelings, and behavior. Through our therapy sessions, you might develop unpleasant feelings and thoughts as well as new insights. Also, you may experience challenge and conflict. It might be difficult and confusing at times, but it will give you a precious opportunity to explore new aspects of yourself. As an individual, you have the right to refuse any treatment you do not want, and the right to choose a practitioner and treatment modality which best suits your needs.

#### My Therapeutic Orientation

My counseling philosophy is influenced by Adlerian and Gestalt therapies and my approach is holistic, humanistic, and relationship-oriented. I hold a sense of trust that people have capacity to solve their issues and potential to grow. I build collaborative, trusting, and caring relationships with clients and maintain the relationships throughout the therapy. Therapeutic goals will be decided through discussion, considering your needs and desired outcomes. Every individual and situation is unique, and I cannot predict the length of therapy needed or guarantee a specific outcome or result.

Currently I do not offer in-person counseling or initial consultation at office due to the risk of COVID-19, but instead I provide telehealth (video or phone) session until further notice.

Telehealth (video and phone) counseling can be provided when such service will be appropriate for the situation, benefit clients, and be effective to the treatment. Therapy sessions typically last 50 minutes.

#### **Fees**

Initial consultation by phone lasts 15-20 minutes and is free of charge, and consultation by a video meeting lasts 50 minutes and the fee is \$50. A regular 50-minute psychotherapy session charges \$130. Occasionally due to a client's request or/and clinical necessity of extra treatment, extended sessions are provided; a 70-minute session is \$164(10% off), and a 90-minute session is \$199(15% off). As well, phone sessions are available. A 30minute-phone session is \$78, and a 50minute-phone session is \$130. The fees for phone sessions will be out of pocket and not be listed on the monthly statement for the reimbursement from health insurance companies. Fee reduction may be considered in some cases.

The fee for a scheduled session will be charged a day (about 24hours) before the session in the form of credit cards through Ivy Pay. While I do not bill insurance, I can provide you with a documentation (monthly statement) for you to receive a reimbursement by your insurance company. Phone sessions and any medical or other correspondence or reports will be billed in quarter-hour increments at the hourly rate. I will notify you of any additional charges before they occur.

#### **Good Faith Estimate of Costs**

Per session rates:

- Initial consultation by a video (50 minutes) is \$50.
- Psychotherapy session (50-minutes) is \$130.
- Extended sessions (70-minutes) is \$164
- Extended sessions (90-minutes) is \$199
- Phone session (30minutes) is \$78
- Phone session (50minutes) is \$130

NPI: 1457874927 EIN: 82-1628966

I am not able to propose an appropriate diagnosis or course of treatment for you until we have spent some time together. As soon as I am able to identify a diagnosis and an appropriate course of treatment, I will discuss it with you.

Services are anticipated to be provided generally on a weekly basis until treatment is terminated. Additional services may be recommended. This estimate of your costs is only an estimate, and your actual charges may differ. You have the right to initiate the patient–provider dispute resolution process if the charges you are actual billed substantially exceed the expected charges in this estimate. You may contact me directly if the billed charges are higher than this Good Faith Estimate, or you can start a dispute resolution process with the U.S. Department of Health and Human Services (HHS) directly. If you choose to use the dispute resolution process, that will not adversely affect the quality of health care services I provide to you. This estimate of costs is not a contract and does not obligate you to obtain clinical services from me.

## **Communications**

Contacting Me

When you need to contact me, Yukiko Hartman, for any reason, these are the most effective ways to get in touch in a reasonable amount of time:

- By phone (206-715-0291). You may leave messages on the voicemail, which is confidential.
- By secure text message (see below for details.)
- By secure email (see below for details.)
- If you wish to communicate with me by normal email or normal text message, please inquire about the potential confidentiality risks of doing so.

I subscribe to the following service(s) that can allow us to communicate more privately through the use of encryption and other privacy technologies. None of them will cost you money, but each requires some setup before they can be used. Please ask if you would like to use any of these services:

- Encrypted secure email: yukiko@yukikopsychotherapy.com via Hushmail.
- Secure text messaging: Signal. This service can be used on a computer or smartphone.

If you need to send a file such as a PDF or other digital document, please send using my secure (encrypted) email service," or print and mail it to my office.

Please do not make contact with me using social media messaging systems such as Facebook Messenger. These methods have very poor security and I am not prepared to watch them closely for important messages from clients.

It is important that we be able to communicate and also keep the confidential space that is vital to therapy. Please speak with me about any concerns you have regarding my preferred communication methods.

## Response Time

I may not be able to respond to your messages and calls immediately. For voicemails and other messages, you can generally expect my response within 24hours (weekends are excepted from this timeframe). At times, I may occasionally reply more quickly or more slowly than this.

Be aware that there may be times when I am unable to receive or respond to messages, such as when out of cellular range or out of town or the country.

# **Emergency Contact**

Should you feel that your situation requires immediate attention, you may leave a confidential message on my voicemail at any time. I will guarantee to call you back within 24 hours and attempt to call you as soon as I could. If you feel that you are in a crisis and I am not immediately available, you are strongly advised to contact the National Crisis line at (800) 273-8255, or the Police at 911. In such situations, you may also go to the nearest hospital Emergency Room. If we do speak by phone, you may be billed at the phone therapy session rate.

Please do not use SMS (normal phone text messages) in emergencies. Please note that SMS are not designed for emergency contact. SMS text messages occasionally get delayed and on rare occasions may be lost.

## Disclosure Regarding Third-Party Access to Communications

Please know that if we use electronic communications methods, such as email, texting, online video, and possibly others, there are various technicians and administrators who maintain these services and may have access to the content of those communications. In some cases, these accesses are more likely than in others.

Of special consideration are work email addresses. If you use your work email to communicate with me, your employer may access our email communications. There may be similar issues involved in school email or other email accounts associated with organizations that you are affiliated with. Additionally, people with access to your computer, mobile phone, and/or other devices may also have access to your email and/or text messages. Please take a moment to think about the risks involved if any of these persons were to access the messages we exchange with each other.

#### **Cancellations**

Appointments are made in advance specifically for you. If you are unable to keep your scheduled appointment, a 24 hour-notice is required for re-scheduling or canceling an appointment. The full fee will be charged for sessions missed without such notification.

#### Confidentiality

All information disclosed within sessions and the written records pertaining to those sessions <u>are confidential</u> and may not be revealed to anyone without your written permission except where disclosure is required by law.

### When disclosure is required by law

Some of the circumstances where disclosure is required by law are: where there is a reasonable suspicion of child, dependent, or elder abuse or neglect; where a client presents a danger to self, to others, to property, or is gravely disabled; or when a client's family members communicate to me that the client presents a danger to others.

# When disclosure may be required by law

Disclosure may also be required pursuant to a legal proceeding by or against you. If you place your mental status at issue in litigation initiated by you, the defendant may have the right to obtain the psychotherapy records and/or testimony by me.

### **Consultation and Access to Records**

I seek ongoing consultation from colleagues in order to provide you with the best services possible. I may disclose information about you in consultation with colleagues, in which case I will limit the information I disclose to the minimum amount necessary. I have an agreement with my colleague to access my client files, in accordance with all applicable state and federal laws or rules, in order to make appropriate notification and referrals in case I am temporarily or permanently incapacitated. If you do not consent to my colleague accessing your file in case of my incapacity, please let me know so that I may make alternative arrangements.

# **Termination of therapy**

The length of your treatment and the timing of the eventual termination of your treatment depend upon the specifics of your treatment plan and the progress you achieve. It is a good idea to plan for your therapy termination and we will discuss a plan as you approach the completion of your treatment. I may need to terminate therapy with you if I believe therapy is no longer beneficial to you; if I believe you will be better served by another professional; or when you have failed to show up for the last two sessions without a 24 hour notice. If, without having made prior arrangements, I have not heard from you in 30 days I will assume that you would like me to terminate our current episode of care and close your active clinical file. In such cases, we may re-open the file and initiate a new episode of care once we meet in person.

You may discontinue therapy at any time for any reason. If we determine that you are not benefiting from treatment, you may elect to initiate discussion of your treatment alternatives. This may include other options such as referral, changing treatment plan and goals or terminating your therapy.

Upon either party's decision to terminate therapy, generally I recommend that you participate in at least one termination session. This session is intended to promote positive termination experience and give you and me an opportunity to reflect on the work that we have done together. As well, I will attempt to ensure a smooth transition to another therapist, if necessary, by offering referrals to you.

#### **Complaints**

The Board of Behavioral Sciences receives and responds to complaints regarding services provided within the scope of practice of professional clinical counselors. You may contact the board online at www.bbs.ca.gov, or by calling (916) 574-7830.

# **Agreement for Services**

By signing below, I attest that I have received, read, understand and agree to the policies and procedures described above. and that I have received a copy of my HIPAA Notice of Privacy Practices.

By signing below, I consent to p	articipate in clinical services with <b>Yukiko F</b>	lartman, MS, LMHC, LPC0
Printed Name	Signature	Date
Client Date of Birth		

Yukiko Kawabata Hartman, MS, , LMHC, LPCC WALicensed Mental HealthCounselor, LH60182354
CA Licensed Professional Clinical Counselor LPCC3885
4079 Governor Dr #3002
San Diego, CA 92122
(206)715-0291
yukiko@yukikopsychotherapy.com