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PSYCHOTHERAPY INFORMATION DISCLOSURE STATEMENT

Therapy is a relationship that works in part because of clearly defined rights and responsibilities held by each person. This frame helps to create the safety to take risks and the support to become empowered to change. As a client in psychotherapy, you have certain rights that are important for you to know about because this is your therapy, whose goal is your well-being. There are also certain limitations to those rights that you should be aware of. As a therapist, I have corresponding responsibilities to you.

My Responsibilities to You as Your Therapist

I. Confidentiality

With the exception of certain specific exceptions described below, you have the absolute right to the confidentiality of your therapy. I cannot and will not tell anyone else what you have told me, or even that you are in therapy with me without your prior written permission. I will always act so as to protect your privacy even if you do release me in writing to share information about you. You may direct me to share information with whomever you choose, and you can change your mind and revoke that permission at any time. You may request anyone you wish to attend a therapy session with you. All I ask, is that you discuss who you would like to attend with me in advance of the session, so that I can best understand the purpose and objectives of inviting the attendee.

You are also protected under the provisions of the Federal Health Insurance Portability and Accountability Act (HIPAA). This law insures the confidentiality of all electronic transmission of information about you. Whenever I transmit information about you electronically (for example, sending bills or faxing information), it will be done to insure confidentiality.

If you elect to communicate with me by email at some point in our work together, please be aware that email is not completely confidential. All emails are retained in the logs of your or my internet service provider. While under normal circumstances no one looks at these logs, they are, in theory, available to be read by the system administrator(s) of the internet service provider. Any email I receive from you, and any responses that I send to you, will be printed out and kept in your treatment record.

The following are legal exceptions to your right to confidentiality. I would inform you of any time when I think I will have to put these into effect.

1. If I have good reason to believe that you will harm another person, I must attempt to inform that person and warn them of your intentions. I must also contact the police and ask them to protect your intended victim.
2. If I have good reason to believe that you are abusing or neglecting a child or vulnerable adult, or if you give me information about someone else who is doing this, I must inform the corresponding appropriate department (Department of Elder Services or Department of Child and Family Services).
3. If I believe that you are in imminent danger of harming yourself, I may legally break confidentiality and call the police. I would explore all other options with you before I took this step. If at that point you were unwilling to take steps to guarantee your safety, I would call the police.

II. Record-keeping:

I keep very brief records, noting only that you have been here, what interventions happened in session, and the topics we discussed. Under the provisions of the Health Care Information Act of 1992, you have the right to a copy of your file at any time. You have the right to request that I correct any errors in your file. You have the right to request that I make a copy of your file available to any other health care provider at your written request. I maintain your records in a secure location that cannot be accessed by anyone else.

III. Diagnosis:

If a third party such as an insurance company is paying for part of your bill, I am normally required to give a diagnosis to that third party in order to be paid. Diagnoses are technical terms that describe the nature of your problems and something about whether they are short-term or long-term problems. If you would like to discuss diagnoses, we can certainly do that in our sessions.

IV. Other Rights:

You have the right to ask questions about anything that happens in therapy. I'm always willing to discuss how and why I've decided to do what I'm doing, and to look at alternatives that might work better. You can feel free to ask me to try something that you think will be helpful. You can ask me about my training for working with your concerns, and can request that I refer you to someone else if you decide I'm not the right therapist for you. You are free to leave therapy at any time.

V. Managed Mental Health Care

If your therapy is being paid for in full or in part by a managed care firm, there are usually further limitations to your rights as a client imposed by the contract of the

managed care firm. These may include their decision to limit the number of sessions available to you or to decide the time period within which you must complete your therapy with me. They may also decide that you must see another therapist in their network rather than me, if I am not on their list. Such firms also at times may require some sort of detailed reports of your progress in therapy, and on occasion, copies of your case file, on a regular basis. I do not have control over any aspect of their rules. However, I will do all that I can to maximize the benefits you receive by filing necessary forms and gaining required authorizations for treatment, and assist you in advocating with the MC company as needed.

VI. My Training and Approach to Therapy

For over 24 years I have been committed to helping individuals, couples, and groups improve and grow by serving their mental health and wellness needs. As a psychotherapist and Licensed Mental Health Counselor, I offer individual and couples psychotherapy services for a wide range of issues, concerns, and struggles. I view my role as a counselor and psychotherapist as responsible for facilitating a therapeutic relationship rooted in efforts to promote a growth fostering experience. I aim to build connection, help clarify, co-pilot, and support. I view and approach psychotherapy as more of a holistic and conversational healing-oriented art form, rather than a medical science. It's truly a relational journey through which together we are likely to work on helping you identify, understand, and express important feelings; identify and challenge unhelpful thinking patterns; and identify and change unhelpful behaviors into new behaviors that support your personal goals.

My contributions toward our work are rooted more in whom and how I am and relate with you, and less about anything I do or may suggest you do. I'm definitely more of an artist, less of a technician; more consultant, not a prescriber. I don't aim to cure, fix, and am even slightly uncomfortable with the term "treat". I am informed in how I am with clients from an eclectic range of teachers, sources, mentors, approaches, and experiences. My greatest mentors have been my clients across 24 years of counseling work, as well as my many teachers and clinical supervisors in undergraduate, graduate, and 20 years of post-graduate counseling experience. Primary theoretical influences in how and who I am in session include: Relational-Cultural and Gay Affirmative theories and therapies. Additionally, client centered, humanist, feminist, spiritual, cognitive, behavioral, harm-reduction, psychodynamic, and other interpersonal and relational theorists and "book" mentors inform how I work.

I started my professional counseling career with Alternative Home Inc. in 1991 as a counselor working with individuals experiencing dual diagnoses (a major mental illness and substance abuse/dependency issues). This important work supported individuals in residential group homes at living and getting well in their home communities rather than being institutionalized. My career in mental health work as a counselor and psychotherapist continued across the past two decades working with a broad range of populations experiencing a wide spectrum of mental health related concerns and struggles. The settings I have worked in as a mental health clinician, supervisor, counselor, and therapist have included psychiatric, general, and substance abuse hospitals, residential programs, college counseling centers, and as an outpatient therapist working in schools, homes and clinic offices. In these varied settings over the past 24 years, I have helped individuals in need of many different levels of care, including: inpatient, partial

hospital programs, day and evening treatment, intensive outpatient programs, and mostly individual, couples, and group outpatient therapy. I graduated with a Master of Arts in Counseling Psychology in May of 1995 from Lesley University. I have 20 years of post-Master's full-time clinical experience, as well as 17 years of post-Licensure experience. I was initially licensed as a Mental Health Counselor (LMHC, MA license #4132) in May of 1998, and my license has remained in good standing with the Commonwealth of Massachusetts since. Additionally, I have post-graduate training in Rational Emotive Behavioral and Cognitive Behavioral Therapies from two practicums I completed at the world renowned Albert Ellis Institute in New York City, which resulted in Advanced Certification in REBT/CBT work.

A few points about my practice to keep in my mind:

I may suggest that you consult with a physical health care provider regarding treatments that could help you with your struggles or challenges. I may suggest that you get involved in additional therapy (group or couples) or support groups as part of your work with me. If another health care provider is working with you, I may need a release of information from you if we should decide it makes sense for me to communicate freely with that person about your care.

You have the right to refuse anything that I suggest. I do not have social or sexual relationships with clients or former clients because that would not only be unethical and illegal, it would be an abuse of the power I have as a therapist.

Therapy also has potential emotional risks. Approaching feelings or thoughts that you have tried not to think about for a long time may be painful. Making changes in your beliefs or behaviors can be scary, and sometimes disruptive to the relationships you already have. You may find your relationship with me to be a source of strong feelings, some of them painful at times. It is important that you consider carefully whether these risks are worth the benefits to you of changing. Most people who take these risks find that therapy is helpful.

You normally will be the one who decides therapy will end, with three exceptions. If we have contracted for a specific short-term piece of work, we will finish therapy at the end of that contract. If I am not in my judgment able to help you, because of the kind of problem you have or because my training and skills in my judgment are not appropriate, I will inform you of this fact and refer you to another therapist who may meet your needs. If you do violence to, threaten, verbally or physically, or harass myself, the office, or my family, I reserve the right to terminate you unilaterally and immediately from our work together. If I terminate you from therapy, I will offer you referrals to other sources of care, but cannot guarantee that they will accept you for therapy.

I may be away from the office several times in the year for vacations or to attend professional meetings. If I am not taking and responding to phone messages during those times I will have someone cover my practice. I will tell you well in advance of any anticipated lengthy absences, and give you the name and phone number of the therapist who will be covering my practice during my absence.

If you are experiencing an emergency when I am out of town, or outside of my regular office hours (outside of 9 AM - 7 PM Monday - Friday), go to the nearest hospital emergency room for assistance or contact UMASS Memorial Medical Center Mental Health Emergencies Services at 508-334-3562.

VII. Your Responsibilities as a Therapy Client

You are responsible for coming to your session on time and at the time we have scheduled. Sessions last for 45-50 minutes. If you are late, we will end on time (at the end of the scheduled 50 minutes) and not run over. If you miss a session without canceling, or cancel with less than twenty-four hours notice, you must pay for that session at our next regularly scheduled meeting. The voicemail greeting at 508-944-8534 has a time and date stamp which will keep track of the time that you called me to cancel. I cannot bill these sessions to your insurance. The only exception to this rule is if you would endanger yourself by attempting to come (for instance, driving on icy roads without proper tires), or if you or someone whose caregiver you are has fallen ill suddenly.

You are responsible for paying for your session at the scheduled time of the session, unless we have made other firm arrangements in advance. My standard fee for a session is 110.00. However, *if you are using insurance, you will be responsible for your co-pay and/or any deductibles or non-reimbursed amounts allowable under your plan.* I accept cash or a check only at the time of each session. If the insurance reimbursement amount allowed is less than my fee of 110 per session, and you cancel with *less than 24 hours* notice *or do not show* for an appointment, you will be billed for the amount that I would have been reimbursed by your insurance company along with the insurance plan co-pay. I will note this amount you will be billed for a "no-show" or "less than 24 hour notice" cancellation under the **Client Consent to Psychotherapy** section at the end of this form.

If you have insurance, you are responsible for providing me with the information I need to send in your bill. I will bill directly to your insurance company via electronic means or by submitting claims by mail. You must provide me with your complete insurance identification information, and the complete addresses of any insurance company from whom you receive health insurance benefits. **Ultimately, if your insurance company denies a claim, you will be responsible for payment of any session on a denied claim.**

Complaints

If you're unhappy with what's happening in therapy, I hope you'll talk about it with me so that I can respond to your concerns. I will take such criticism seriously, and with care and respect. If you believe that I've been unwilling to listen and respond, or that I have behaved unethically, you can complain about my behavior to the Massachusetts Board of Allied Mental Health Professionals at 1000 Washington Street, Suite 710, Boston, MA 02118.

Client Consent to Psychotherapy

I have read this statement, had sufficient time to be sure that I considered it carefully, asked any questions that I needed to, and understand it. I understand the limits to confidentiality required by law. I consent to the use of a diagnosis in billing, and to release of that information and other information necessary to complete the billing process. I agree to pay the fee of _____ per session. (***This amount equals the insurance co-payment due at each session or the self-pay fee agreement***) at the time of each session. I understand that if the insurance company denies any claim, I will be responsible for paying for those sessions at a rate equal to the allowed reimbursable amount through the insurance. I also understand and agree to pay this full reimbursable amount = _____ for each session I do not show for or cancel with less than 24 hours notice. I have carefully read and understand my rights and responsibilities as a client, and my therapist's responsibilities to me. I agree to undertake therapy with Andrew Knorr, M.A., LMHC. I know I can end therapy at any time I wish and that I can refuse any requests or suggestions made by Mr. Knorr.

Client Signature: _____ Date: _____

Witness: _____ Date: _____

Parent or Guardian's Signature (if Client is under 18): _____

Date: _____