

PRACTICE POLICIES

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SESSION DURATION

Duration and frequency of sessions are discussed at time of intake and can be adjusted based on need. For patients who wish to use insurance benefits, session duration and frequency are typically determined by your plan benefits and are always a function of what is deemed to be medically necessary for your diagnosis.

SESSION FREQUENCY

Clinicians use their clinical judgment and medically necessity criteria along with their patient's input in determining appropriate session frequency. It is considered the clinical standard and clinically appropriate for therapy to begin with sessions once weekly. If adequate progress toward ultimate goals is made and the patient is demonstrating an improvement in functional psychological baseline, it may be clinically appropriate to reduce session frequency to twice monthly, once monthly, or maintenance phase. In the event that a patient enters maintenance phase of therapy (as needed sessions and/or a non-standard session frequency solely to maintain achieved goals and the functional baseline), an additional consent form is required that outlines your new acknowledgments and responsibilities with regard to this phase of treatment and what is required to remain an active patient.

PROFESSIONAL FEES

Fees and co-pays are to be settled at the beginning of each individual session, program, or service. If paying in person by cash, please bring the exact amount as no change will be made. There is no charge for brief telephone calls and brief electronic exchanges regarding scheduling, updates, and other administrative matters. There is also no charge for typical and periodic consultations with other professionals involved in your care for purposes of coordinating treatment.

FEE SCHEDULE

The following is the current fee schedule as of 01/01/2021:

Initial Intake Evaluation: \$250

Individual therapy session: \$225

Conjoint therapy session: \$225

Couples therapy session: \$250

Psychological Testing (First Hour): \$250

Psychological Testing (Each Additional 30 minutes): \$100

Group Therapy: \$75

Late Cancellations (less than 48 hours), Late Reschedules (less than 48 hours), and No-Shows: \$100

This fee schedule is re-evaluated yearly and may change without notice. All adjustments to these fees that are made for specific cases will be re-evaluated every three months.

FINANCIAL RESPONSIBILITY

If your account balance is more than 90 days past due, and if arrangements for payment have not been agreed upon, prt psychology, inc. is permitted by law to forward your account information, including protected health information (PHI), to a collections agency to secure payment. If legal action becomes necessary, its costs will be included in the claim and you will be responsible to pay said fees. prt psychology, inc. reserves the right to withdraw treatment if the patient or responsible party does not fulfill their financial obligation.

PRACTICE SCHEDULE

Practice schedule, such as days and hours that services are available, is subject to change at any time without notice; however, prt psychology, inc. will endeavor to provide you with 30 days notice of any such changes.

INSURANCE REIMBURSEMENT, COVERAGE, AND OUT-OF-NETWORK BILLING

Most insurance plans cover treatment for mental health concerns. Please note that a psychiatric diagnosis is a requirement to utilize insurance benefits for therapy; therefore, not all concerns are eligible for reimbursement. prt psychology, inc. will inform you at the time of intake if we estimate your concern is unlikely to be reimbursed by your plan; however, we can only make a reasonable estimation.

You are responsible for submitting your co-payment on the day of each session via cash or credit card only. You are also responsible for contacting the behavioral health department of your insurance carrier to determine the limits of your deductible, your co-payment and co-insurance amount, and the allowable rate per visit, including telehealth visits.

If your plan decides to a) not reimburse for services already rendered, b) reclaim reimbursement previously provided, or c) your insurance lapses during your treatment (nonpayment of premiums, not responding to insurance plan requests for contact, etc.), you would be responsible for the balance of fees for services received.

Health insurance policies will usually provide some coverage for “out-of-network” mental health treatment; however, in this case, you, not the insurance company, are responsible for full payment of agreed upon fees at the time of each session. You will be provided with superbills, which are documents that contain information your insurance company may require for your reimbursement, and which you would be in charge of submitting. Importantly, you agree to not authorize that the reimbursement payments be sent to the provider. Doing so will delay your reimbursement with certainty. Alternatively, prt psychology, inc. can provide you with a link to a third-party service, Mentaya, which can manage out-of-network billing more efficiently and conveniently for a small fee per session.

RETROACTIVE INSURANCE BILLING

If prt psychology, inc. is in-network with your insurance plan and you have chosen to sign a Self-Pay Agreement, no retroactive insurance billing is permitted if that Self-Pay Agreement is later terminated. You may choose to terminate the Self-Pay Agreement in writing at any time in favor of utilizing your insurance benefits, and that change will go into effect on the date of termination of the Agreement. Superbills will not be provided for services rendered prior to the termination of the Self-Pay Agreement, and you will not receive reimbursement of self-pay fees from prt psychology, inc., neither partial nor full, for services rendered prior to the date of termination of that Self-Pay Agreement.

EMERGENCIES

In case of an emergency, which is "a serious, unexpected, and often dangerous situation requiring immediate action," you are instructed to first call 911 or visit the nearest emergency room so your safety can be addressed immediately by an appropriate team.

Emergencies must then be communicated to prt psychology, inc. exclusively by phone call.

The National Suicide and Crisis Lifeline is an additional resource to immediately speak to a professional by dialing 988 in the event of a mental health emergency.

COMPLAINTS AND GRIEVANCES

Complaints and grievances can be directed to the California Board of Psychology (<https://www.psychology.ca.gov/>). As required by law, prt psychology, inc. maintains complaint and grievance forms for all current and formerly contracted insurance plans, which can be found on the prt psychology, inc. website (<https://www.drpaulroytaylor.com>).

MEDICAL RECORDS

Medical records, including but not exclusively consent forms, progress notes and evaluations, patient documents, claims and billing information, and email / text communications are retained for seven (7) years as required by law. Current and former patients may request copies of medical records by submitting a formal request in writing detailing the types of records requested.

Insurance plans have the right to request a treatment review and/or request and receive a member's complete medical record from any provider billing for services, including prt psychology, inc.

In the case of out-of-network submission of claims for reimbursement, the insurance plan could ask to review your treatment or ask for your clinician's session notes. You have the right to refuse the treatment review or the release of notes, but understand that if you do refuse, the insurance plan may not reimburse for those sessions. In the case of out-of-network billing, you understand that your clinician is not a provider for your insurance plan, and thus does not guarantee reimbursement or that the documentation and session notes kept will meet insurance plan requirements.

DOCUMENT TRANSMISSION

prt psychology, inc. uses the Simple Practice HIPAA compliant client portal for the transmission of all administrative and clinical documentation, including but not limited to invoices, superbills, administrative letters, and discharge notices. For patients who do not wish to receive their

administrative and clinical documentation via the Simple Practice client portal, they must notify prt psychology, inc. in writing and state their preference for document transmission either by U.S. Postal Service or fax.

PROFESSIONAL WILL AND CONTINUITY OF CARE

In the event of the sudden unexpected absence, incapacitation, or death of your clinician, a designated licensed mental health professional will serve as the Professional Executor for prt psychology, inc. To ensure your continuity of care and the safe keeping of your clinical files, this individual will be granted authorized legal access to the practice management platform (SimplePractice). They are strictly bound by the same state and federal confidentiality laws as your clinician. Their sole purpose will be to contact you, securely manage or transfer your records, and assist you with referrals or transitions if necessary.

NO RECORDING OF SESSIONS

prt psychology, inc. does not record sessions in any format, e.g., audio, video, simultaneous audio/video. Without written prior consent, prt psychology, inc. does not permit patients to record sessions in any format, e.g., audio, video, simultaneous audio/video. California Penal Code makes it illegal to record a conversation without the consent of all parties involved.

SOCIAL MEDIA AND SOCIAL APPLICATIONS

Social media is now an unavoidable part of modern life and can connect people in unexpected ways. In order to reduce risk of harm to the therapeutic relationship, you and your clinician at prt psychology, inc. agree not to seek or interact with each other on any form of social media or mobile social applications. In the case of public, professional pages on Facebook, LinkedIn, and other platforms, we do not accept formal friend or contact requests on these mediums from current or former patients. In the event contact is by accident or unavoidable, any discussion on the matter, if necessary, will occur only in session.

INTERACTIONS OUTSIDE THE OFFICE OR IN A NON-THERAPEUTIC CONTEXT

If you and your clinician see each other accidentally outside of the therapy office, your clinician will not acknowledge you first. This is purely out of respect for your right to privacy and confidentiality. You are welcome to acknowledge your clinician first or not at all, but know that they can only speak briefly with you, as it would be inappropriate to engage in any lengthy discussions in public or outside of the therapy office.

TREATING MINORS

Parent(s) or appointed guardian(s) are legally entitled to specific information about the psychological treatment of a minor in their care. prt psychology, inc. will discuss with the parent(s) or guardian(s) which information they are legally entitled to receive. We will also inform the minor of the contents of that discussion.

Parents and legal guardians must take into account when considering prt psychology, inc. that our policies operate far above the legal minimum requirements regarding privacy and confidentiality of the

minor. These policies are as follows and are in place to endeavor for the best possible outcomes for the minor in treatment:

The parent(s) or legal guardian(s) will be made aware and required to agree in writing that we will not provide any information beyond the legal obligation unless the information is specifically permitted by the minor. We will refuse to treat a minor if a confidentiality agreement cannot be agreed to first by the clinician, then by the minor, and finally by the parent(s) or legal guardian. If there are repeated gestures by a parent(s) or guardian(s) to breach the therapeutic relationship between the clinician and the minor, we will terminate treatment. Parents and legal guardians will not receive progress reports nor summaries of treatment content. If determined to be clinically appropriate for the minor, family and others with close relationships may periodically be permitted to attend conjoint sessions if the minor consents.

TERMINATION AND DISCHARGE POLICY

Ending relationships can be difficult; therefore, it is important to have a termination process in order to achieve some closure. The appropriate length of the termination process depends on the duration and intensity of the treatment. Most treatment terminations are based on mutual agreement of achieved goals; however, there are certain situations within the bounds of profession ethics in which your clinician may independently choose to terminate treatment, such as: 1) the determination that treatment is not achieving desired results; 2) if treatment is not being effectively used; 3) the treatment approach has reached its maximum potential; 4) all treatment goals have been met; 5) non-payment for services delivered; 6) if there emerges a pattern of two or more no-shows, late reschedules, and/or late cancellations within a three month period; 7) a pattern of frequently canceling appointments such that optimal and effective treatment can no longer be delivered by your clinician; 8) and in situations of harassment, abuse, or mistreatment. In these circumstances, we will not terminate the therapeutic relationship without first discussing and exploring the reasons and purpose of terminating.

A patient is also formally discharged from prt psychology, inc. when they do not present for session and cease to make contact. After 14 days from a missed session, you will receive an informal letter via the Patient Portal inquiring as to your intention to remain or discontinue treatment. You are invited to reach out and inform your clinician of the desire to reschedule, seek accommodation, or discontinue treatment. If no contact is made by you from the date of inquiry, you will be formally discharged 30 days thereafter and your treatment relationship with prt psychology, inc. formally terminated.