

2023 PRACTICE POLICIES AND CANCELLATION POLICY

Triskelion Counseling

(207) 613-1939

triskelioncounseling2022@gmail.com

PRACTICE POLICIES AND CANCELLATION POLICY

CANCELLATION POLICY: You must provide 24 hours' notice if you need to cancel or reschedule an appointment. You will be charged for late cancellations or no-shows as follows:

LATE CANCELLATION FEES: If you cancel less than 24 hours before your scheduled appointment, you will be charged a late cancellation fee of \$50.

NO-SHOW FEES: If you no-show or do not give any prior notice of cancellation, you will be charged the full fee amount (\$100-\$150) of your scheduled session.

Late cancellation and no-show fees will be charged immediately following your missed visit. The credit card information on file will be used to process this payment. By providing us with your credit card information, you consent to this policy. Repeated late cancellations and no-shows may result in the termination of therapy.

LATE ARRIVAL: If you arrive more than 10 minutes late, it will be under the therapist's discretion if you can be seen due to time constraints. The appointment will be considered a "no show" due to your late arrival, and the associated full fee will be charged.

OUT OF STATE: If you are out of state for your telehealth session, that appointment will be considered a "no show" and the associated full fee will be charged. All clients must be located in the State of Maine when meeting with their therapist, including by telehealth.

IMPAIRMENT: If you arrive for the session under the influence of substances or otherwise unable to coherently participate in session (for example, falling asleep, driving, shopping), the session will be canceled and considered a "no show" with the associated full fee charged.

EXCEPTIONS: The only exception to this cancellation policy is in the event of a serious or contagious illness or emergency. Some examples of emergencies are car accidents, deaths in the family or extreme illness. Work issues do not constitute emergencies. Other examples of problems that do not qualify as exceptions include oversleeping, a babysitter canceling, a meeting at work, another doctor's appointment, forgetting or being on vacation. Exceptions are made at the discretion of your therapist.

PAYMENT: The client is responsible for payment, by cash, check, or credit card, at each appointment. A credit card MUST be kept on file to guarantee payment. **DEFAULT ON PAYMENT MAY BE CAUSE FOR TERMINATION OF THERAPY AND THE BILL MAY BE SENT TO A COLLECTION AGENCY.** The client

is responsible for paying the full session fee. You will also be provided with a superbill which you may submit to your insurance carrier or other third-party payer but there is no guarantee of reimbursement. A \$20.00 service charge will be charged for any checks returned for any reason.

TELEHEALTH: Please note that in order to participate in telehealth appointments you must be a resident of the State of Maine AND be physically located in the State of Maine during the entirety of the telehealth appointment. Please reschedule your session at least 24 hours in advance if you are planning to be out of state during your appointment. If we must discontinue an appointment because you are not in the State of Maine, you will be charged the full fee for the session.

TELEPHONE ACCESSIBILITY: If you need to contact me between sessions, please leave a message on my voicemail. I am often not immediately available; however, I will attempt to return your call within 24 hours. If a true emergency situation arises, please call 1-888-568-1112 (Maine Statewide Crisis Line), 911 or go to your local emergency department.

ELECTRONIC COMMUNICATION: You may communicate via email or text messaging for issues regarding scheduling or cancellations. I request that you do not use these methods of communication to discuss therapeutic content and/or request assistance for emergencies due confidentiality and the possibility of a delayed response.

SOCIAL MEDIA AND TELECOMMUNICATION: Due to the importance of your confidentiality and the importance of minimizing dual relationships, I do not accept friend or contact requests from current or former clients on any social networking site (Facebook, LinkedIn, etc). I believe that adding clients as friends or contacts on these sites can compromise your confidentiality and our respective privacy. It may also blur the boundaries of our therapeutic relationship. If you have questions about this, please bring them up when we meet and we can talk more about it.

MINORS: If you are a minor, your parents may be legally entitled to some information about your therapy. I will discuss with you and your parents what information is appropriate for them to receive and which issues are more appropriately kept confidential.

TERMINATION: 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 depends on the length and intensity of the treatment. I may terminate treatment after appropriate discussion with you if I determine that the psychotherapy is not being effectively used or if you are in default on payment. I will not terminate the therapeutic relationship without first discussing and exploring the reasons and purpose of terminating. If therapy is terminated for any reason or you request another therapist, I will provide you with a list of qualified psychotherapists to treat you. You may also choose someone on your own or from another referral source.

BY CLICKING ON THE CHECKBOX BELOW I AM AGREEING THAT I HAVE READ, UNDERSTOOD AND AGREE TO THE ITEMS CONTAINED IN THIS DOCUMENT, INCLUDING THE CANCELLATION POLICY.