

LPS Behavioral Health, LLC Information for New Patients

Thank you for choosing our office. We provide psychological assessment, counseling, psychotherapy, and consultation services to children, adults, and families on a wide range of mental health concerns.

The decision to seek counseling is a difficult one for many people. This document is intended to help you better understand the nature of our services, as well as what you may expect from us and what we expect of you during your contact with us. If, at any time, you have questions or concerns about the services you are receiving, please do not hesitate to raise them with your clinician.

What Occurs During Counseling and Therapy Appointments

When a patient begins counseling here, one of our clinicians (typically, a clinical psychologist) will conduct an initial psychological evaluation to assess the patient's needs and determine if there are any other circumstances that should be addressed while working on the problems presented. The nature and extensiveness of this initial evaluation will vary per the patient's needs and the nature of the problem presented. However, these evaluations almost always include a review of the patient's social and family history and an overall assessment of mental health. If needed, your clinician may ask you to complete one or more psychological inventories or scales in order to help in determining sources of your concerns. The initial interview requires from 60 to 90 minutes; testing may require additional time.

Counseling and therapy generally are conducted in weekly appointments ranging from 25 to 75 minutes. Group sessions vary in length per the purposes of the group. Usually, more than one counseling/therapy interview will be required to assist you. On the average, our clients remain in treatment here from eight to twelve appointments, although many complete their treatment in less than eight appointments and some require more than twelve. If you find that you are unable to keep a scheduled appointment, please call 765.318.1225 as soon as possible. We will make every effort to schedule another appointment at a more convenient time. The telephone is monitored 24 hours and if your call is answered electronically, we will return your call within 24 hours.

If you do not attend a scheduled appointment and do not call to cancel the appointment at least 24 hours before it was scheduled, you will be charged \$45.00. This fee cannot be billed to an insurance carrier or government program and must be paid before another appointment will be scheduled.

Missed Appointments

A patient misses two appointments without giving 24-hour notice in any given eight-week period will be asked to seek mental health services from another provider, unless the patient's clinician or Dr. Robison allows the patient to continue receiving services here.

Confidentiality of Information

Generally, the information you disclose during assessment, counseling, and therapy interviews is confidential. We may not release information from your treatment file to other persons or agencies unless you sign a written consent (called a "release of information form") that allows us to disclose information to specific parties. If you provide consent to release information from your (or your dependent's) file, you have the right to revoke your consent within a reasonable time. If you decide to revoke an information release you have signed here, you may do so by signing the "revocation" section on your copy of the form and returning it to our office.

However, under Indiana law, there are certain circumstances under which information you disclose cannot be treated in complete confidence and there are certain types of information that must be reported to the appropriate authorities. Circumstances under which information may not be treated as confidential include the following:

1. *situations in which a patient discloses information that, in the therapist's professional judgement indicates s/he or someone else is physically neglecting, or physically or sexually abusing, a minor child or vulnerable adult;*
2. *situations in which a patient discloses information that, in the therapist's professional judgment indicates that the patient intends to harm self or another person;*
3. *Situations in which a patient's records are summoned by a court of law as evidence in the adjudication of the state's case against a patient;*
4. *situations in which information is summoned by a court of law in order to settle the will of a deceased patient;*
5. *situations in which a patient has sued a psychologist for malpractice; and*
6. *situations in which the patient has signed a written consent with a federal, state, or local agency that requires us to disclose information about a patient to that agency; or has signed a written consent with any other party requiring us to disclose information to that party.*

Please understand that we must report information that leads to knowledge or suspicion that a child or vulnerable adult is being physically abused, sexually abused, or neglected. We must report information that leads us to believe that a patient may attempt suicide or harm another person.

If, at any time, you have questions as to the confidentiality of information you may wish to disclose, please discuss those questions with your clinician.

Limitations to Our Services

Our staff is prepared to work with most problems our patients present. However, there are a few situations in which we cannot be of help to patients. Those situations are described below:

1. We are not able to accept cases in which the problem involves a child's difficulties with visitation with divorced parents. **We do not voluntarily provide testimony in civil court cases.** In visitation situations, court appearances often are required. Families who wish to seek counseling for their children and/or themselves to cope more successfully with visitations are encouraged to seek a family therapist who works with these types of situations. **If we are working with a child or family and are subpoenaed to court to provide testimony for or against the child or family in court, we will comply with the court order but will immediately refer the child or family to another appropriate provider upon being subpoenaed.** Please be advised that our fee for court appearances is \$170.00 per hour for all time away from the office, including travel to and from court and all time at court in addition to actual testimony. This fee cannot be billed to insurance.
2. We do not provide custody evaluations under any circumstances.

Psychiatric Services

Our clinic is pleased to offer mental health medical services at our Greenwood and Bloomington offices. Services are provided by advanced practice nurses with extensive backgrounds in psychiatric nursing practice.

This guide describes the policies and procedures we use when working with patients who are seen by our medical consultants.

1. Patients may be referred to our medical consultants from our staff clinicians, clinicians (i.e., therapists, counselors, psychologists) or medical professionals in other practices, or representatives of other organizations.
2. All patients seeking an initial visit with a medical consultant must have an established relationship with a primary care practitioner (i.e., a physician or nurse practitioner). Our nurse practitioners do not provide primary care and will coordinate your psychiatric care with the more comprehensive care your primary care practitioner provides. If you do not have a primary care practitioner, our office will assist you in locating one.
3. Prior to making an initial appointment to see one of our nurse practitioners, new patients at our clinic will meet with one of our mental health clinicians for a diagnostic intake. During this session, the clinician will obtain information on the nature of patient's concerns, obtain personal, medical, and mental health histories, and conduct a mental status examination. These intake sessions typically are 45 to 60 minutes. If psychological testing is required, more time (or an additional session) may be needed. Current patients at LPS Behavioral Health or Shady Grove Behavioral Health do not need to schedule this intake session unless it is requested by their therapist.
4. Notes from this diagnostic intake will be sent to the nurse practitioner to which the patient is assigned. The patient will be contacted by our office staff, who will make an appointment for the patient with the nurse practitioner in Greenwood or Bloomington.
5. The initial appointment with the nurse practitioner typically is 55 to 60 minutes in duration. The nurse practitioner will review the intake and assessment notes with the patient, conduct a brief medical examination and develop a medical treatment plan with the patient. This plan often will involve genetic testing to ascertain medication compatibility, selection of appropriate psychotropic medications, and development of a follow-up consultation schedule.
6. Please understand that we are not a "medication only" clinic. All patients receiving psychiatric services from our nurse practitioners must participate in scheduled follow-up services with them. Patients also are required to participate in counseling services from one of our therapists throughout the time they see the nurse practitioners, unless other arrangements for counseling are approved by the clinic directors. Patients may see a therapist not connected our office if the patient authorizes the nurse practitioner to exchange information with that therapist. Patients who complete their treatments and are formally discharged by their therapists may continue to receive mental health medical services here. However, patients who drop out of counseling or violate our missed appointments policy may not continue receiving medical mental health services at this clinic, and will be referred elsewhere.

Fees and Insurance Matters

Fees for the various services provided by this clinic are described in this information packet.

Many private and employer-provided health insurance programs will reimburse you for a portion of our fees. If you can provide our office with information about your insurance, we will submit claims for you. If you wish us to submit claims to your carrier, please keep the following in mind.

1. Unless other arrangements are made in advance (such as submission of claims for part of the fees to an insurance carrier), fees for services rendered during an appointment are to be paid to the office manager after your appointment.

2. Various insurance carriers differ in the amount of reimbursement provided for mental health services. Many carriers pay less on mental health claims than on general medical claims, regardless of the information printed on your insurance card.

3. Upon receiving information about your insurance from you, we will attempt to verify your eligibility on your behalf. Please understand that we are not always to contact your carrier immediately. In addition, information given to us by your carrier may not always be accurate, as some carrier representatives prefer to talk with their insured person about these matters. You are responsible for determining if our services to you will be covered by your insurance. If you are unsure as to your carrier's mental health coverage, please contact your representative or consult your policy handbook to determine the amount of reimbursement you can expect.

4. Most employee and other private insurance policies expect their insured persons to pay an annual deductible (amount of medical fees that must be paid each year before the carrier makes payments) and a co-payment (a portion of the charges or which patients are responsible). You are responsible for all fees not paid by your insurance. If we will be submitting charges to your insurance carrier for you, then you will be asked to pay the portion of the fee that will not be reimbursed by your insurance (that is, your co-payment). This portion of your fee is due after each interview and usually ranges from 20 to 50 percent of the fee for each visit. If you have not met your annual deductible, then your co-payment is the entire charge for the appointment. Until we are able to verify your insurance coverage, you will be asked to pay either the co-payment amount shown on your insurance card, or, if a co-payment amount is not shown on your card, one-half of your fee at the conclusion of each visit. This co-payment amount will be adjusted based on the response from your insurance as to whether you have met your plan's deductible and on their information regarding the amount of the fee they will cover. If your insurance pays less of your fees than was originally expected, you will be billed in a statement for the amount not paid. Monthly payments may be arranged.

5. If we submit a claim for charges and your carrier sends their payment to you, please forward this payment to our office immediately upon receipt.

7. Our payment policies are described in the form, Agreement to Pay Charges, which is enclosed in this information packet. Please read it carefully before signing it. We will be happy to answer any questions you may have about it.

Participants in Managed Care Programs

If you are enrolled in a managed care program (such as a Health Maintenance Organization or a Preferred Provider Network), you should be aware that, to receive the maximum benefits for services, your provider may be required to be a member of the organization's approved provider group. Approved providers are generally selected based on geographic location and types of services provided in the service area.

If your plan requires services to be provided by an approved provider in order for your services to be covered and Dr. Robison currently is not approved to provide such services for your carrier, you may still choose to receive your services here. However, you will be asked to pay the full charges after each appointment, unless installment payments are arranged.

If you are unsure if your plan requires services to be provided by an approved provider to receive full benefits, please contact your personnel director or consult your employee benefits manual.

Medicaid and County Assistance Recipients

If you are a participant in the Medicaid program or anticipate that your fees will be paid through a county fund, we will defer your fees and bill Medicaid or the county on your behalf. We will accept the standard Medicaid payment for services provided to you. You will not be charged a co-payment for those services. However, should you become ineligible to receive Medicaid, you will become responsible for all fees incurred after the date you become ineligible. If you disagree

with a Medicaid decision that the patient has other insurance, it is your responsibility to work through the disagreement with your OFSS caseworker.

If fees for your services are to be reimbursed by a county or school fund, we usually will have received notice of this fact. If we have not been notified of your eligibility for county-funded services and you believe you are eligible, please discuss this matter with our office manager. We will contact the appropriate county official.

Medicare Recipients

Our office is a provider under Medicare Part B and we accept assignment of benefits. We will file claims for you. If you have not met the Medicare B deductible, you will be responsible for the full fee until the deductible is met. After your deductible is met, you will be asked to pay the co-payment after your appointments, unless monthly installments payments are arranged. If you also receive assistance under Medicaid or have other insurance, your fees will be deferred until all your plans have been billed.

Medicaid and Social Security Disability Evaluations

If you were referred to this office for a psychological examination by the Medicaid Office or the Disability Determination Bureau (SSI, Disability, Medicaid), financial arrangements for your services have been arranged. You will not be asked to pay a fee for any services received as part of that evaluation. **Please understand that the report of your evaluation can be released only to the Social Security Administration. You must request that the DDB send a copy of your report to your physician. You can contact your Social Security Disability caseworker at 800.622.4968.**

Disclosure of Therapist Credentials

Dr. Floyd F. Robison: Dr. Robison has a Ph.D. in Counseling and Educational Psychology from Indiana University (1982). He is a Health Service Provider in Psychology in Indiana. His practice includes psychological evaluation, psychological testing, and psychotropic medication consultation.

Elizabeth A. Robison, M.S., LMHC: Ms. Robison has an M. S. in Counseling and Counselor Education from Indiana University (1997). She is a Licensed Mental Health Counselor. She is in general practice, with emphases in gerontological counseling and child and adolescent development/behavior problems.

Fee Schedule

Standard Fees (Please note that fees negotiated with your insurance or healthcare program may be lower than those fees shown below)

Counseling and Therapy

Initial Interview: 150.00

All subsequent interviews: 130.00

Groups: Counseling and Therapy (when available): 50.00 per group meeting

Psychological Evaluations

Standard Psychological Examination (60 - 90 minutes): 170.00

Neurocognitive Examination: 170.00 - 350.00

Comprehensive Psychological Examination: 340.00

Civil Servant (e.g., police, fire fighter) fitness evaluations: 340.00

Psychoeducational (e.g., school problem) Evaluations: 170.00

ADHD, Autism Spectrum Evaluation: 400.00

Detailed Examination and Case Study: 500.00

Testing

170.00 per hour or portion thereof

Psychiatric Services

170.00 per hour

Consultation

In-Office: 170.00 per hour

Out-of-Office (includes court appearances): 170.00 per hour with a minimum fee of 300.00. Time in court is billed for all time at the courthouse and courtroom, and travel to and from the court. Please advise your attorney of this fee if you plan to subpoena your clinician to testify. If your attorney needs to speak to your clinician in person, the consultation is billed according to the in-office consultation fee.

Professional Supervision: 100.00 per hour

Travel: 35.00 (within 20 miles)

45.00 per hour of travel (more than 20 miles)