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AGREEMENT FOR MENTAL HEALTH SERVICES

Welcome to my practice. This agreement and my separate Notice of Privacy Practices (HIPAA) describe my professional policies. Please ask any questions you may have.

Psychotherapy Services

Psychotherapy has real benefits — it can lead to better relationships, solutions to specific problems, and real reductions in distress. It can also be uncomfortable, since it often means talking about difficult feelings and experiences. That discomfort is a normal part of the work, and talking through it is usually what makes therapy effective. Most people benefit from good psychotherapy, but some don't find it helpful, and in rare cases it can be difficult in ways that aren't productive. Treatment tends to work best when we have a strong working relationship, and you are motivated to engage with the process.

Therapy is a real commitment of time, money, and energy, so it's worth making sure you feel comfortable with the fit between us. Please raise any questions or concerns whenever they come up. Our first few sessions will typically focus on understanding your needs. I'll share my impressions and any treatment plan as we go, and we'll decide together how long treatment should continue, based on your goals.

Who Is the Client

When I work with an individual adult, that person is my client. When I work with a couple, a family, or a minor together with a parent, I'll tell you at the outset whom I consider the client and what responsibilities I have to other participants. This affects confidentiality and how we set goals, so I'm glad to talk through it before we begin.

Teletherapy and PSYPACT

I offer teletherapy as well as in-person sessions. For clients located outside Virginia, I provide teletherapy under my PSYPACT Authority to Practice Interjurisdictional Telepsychology (APIT), which requires you to be physically located, at the time of each session, in a state currently participating in PSYPACT. The law that applies to a session (e.g., reporting duties, privilege) may differ if you're located outside Virginia. I use a HIPAA-compliant platform, but no electronic transmission is completely secure.

Fees, Cancellation, and Insurance

My fee is $ _____ per _____. I am out-of-network with all health insurance plans and do not bill insurance directly. You are responsible for paying my full fee yourself. Upon request, I will give you a Superbill — a statement of services you can submit to your insurer for possible out-of-network reimbursement. Reimbursement is never guaranteed and is a matter between you and your insurance company, so you should check your out-of-network mental health benefits, deductible, and reimbursement rate before relying on it.

Cancellations require 24 hours' notice, or the full session fee applies. Insurance reimbursement, if any, does not cover missed sessions. Because I'm out-of-network, I don't routinely share information about your care with insurers. If an insurer ever contacts me directly about your reimbursement claim, I will not disclose your diagnosis, treatment plan, or any other information about your care without your separate written authorization, except where I'm otherwise required by law to do so (see Confidentiality and Its Limits below). I'll notify you in advance of any changes to my fee or of additional charges for other services (e.g., report writing, extended calls).

Confidentiality and Its Limits

Our sessions are confidential, except as required or permitted by law, including:

- Emergency danger to you or an identifiable other person (duty to protect, Va. Code § 54.1-2400.1);
- Reasonable suspicion that a person currently under 18 is being abused or neglected — based on the child's current age, not when the abuse occurred (Va. Code §§ 63.2-100, 63.2-1509); a similar duty applies to abuse, neglect, or exploitation of a vulnerable adult (Va. Code § 63.2-1606);
- A court order, or if you place your mental condition at issue in a legal proceeding (Va. Code § 8.01-400.2);

I'm glad to discuss any of these limits further, at any time.

Records

I keep records as required by HIPAA and Virginia law. My Notice of Privacy Practices describes your rights to access, amend, and receive an accounting of your records, including the fee I may charge for copies (Va. Code § 32.1-127.1:03(J)).

Minors and Psychological Assessment

I do not commonly treat minors or conduct psychological assessments. If either applies to your care, I will give you a short, separate addendum covering the additional consent, confidentiality, and fee terms specific to that service before we begin.

Contacting Me and Emergencies

Outside of sessions, you may reach me by phone, email, or text, though none of these methods are fully confidential, so please keep messages mainly to scheduling. I check messages regularly during business hours and periodically on weekends and holidays. If I'm unavailable for an extended period, someone will cover for me, and that information will be on my voicemail. For a life-threatening emergency, please call 911, call or text 988 (the Suicide & Crisis Lifeline), or go to the nearest emergency room.

Your Right to File a Complaint

You're welcome to raise any concern with me directly. You may also file a complaint with the Virginia Board of Psychology, 9960 Mayland Drive, Suite 300, Henrico, VA 23233, (804) 367-4406.

Signatures

I, _____, have read, understand, and accept the policies in this agreement. The fee for which I agree to assume responsibility is $ _____ per _____.

YOUR SIGNATURE BELOW INDICATES THAT YOU HAVE READ AND AGREE TO THIS AGREEMENT, AND ACKNOWLEDGES RECEIPT OF THE HIPAA NOTICE DESCRIBED ABOVE.

Signature of patient or authorized representative: _____

Date signed: _____

Steven Wong, Ph.D.: _____

Date signed: _____