

Name: \_\_\_\_\_



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## **ADMINISTRATIVE POLICIES**

### **SERVICES**

Hartstein Psychological Services is comprised of a dedicated team of practitioners who have experience serving diverse client populations with a variety of psychiatric diagnoses. We provide psychological services in the context of a supportive, yet challenging, environment. We believe in each person's power for growth and change. We also believe that individuals enter the world with the full capacity for emotional wellness.

Following a phone screening and initial assessment, clients will be assigned to a therapist within the practice. At that time, the appropriate treatment will be recommended and may include: individual therapy, family therapy, group therapy, parenting skills, as well as any combination of the above.

### **FEES**

Clients will attend two to three (2-3) intake sessions initially, which will help our staff determine treatment course and recommendations. Intake appointments are \$\_\_\_\_\_ for each 60 minute session.

Individual, couples and family sessions are \$\_\_\_\_\_ per 45 minute session.

Group sessions are \$\_\_\_\_\_ per 75 minute session.

Telephone calls exceeding 15 minutes in length are charged as individual therapy sessions, with the additional time being pro-rated based on the session fee. Consultation with other treatment providers will follow the same procedure.

For clients who are enrolled in our Dialectical Behavior Therapy (DBT) program, coaching calls will be assessed on a case-by-case basis. Generally, coaching calls should not exceed 15 minutes. Depending on the focus of, and need for, the coaching call, fees might be waived. If fees need to be instituted, the therapist will discuss this with the client and his/her family.

Fees are subject to change. We will provide you with 30 days notice if there is a change in fee.

### **PAYMENT**

Payment is expected in full at the time of service unless an alternative arrangement has been made in advance.

Hartstein Psychological Services accepts credit cards, checks, cash and money orders. Please refer to the Credit Card Agreement for more specific information related to credit card payments.

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Outstanding balances will accrue an interest charge of 1% per month if greater than 30 days. A credit card must be submitted to Hartstein Psychological Services even if paying by check, money order or cash. The credit card will be kept on file in the event that it is needed to address accounts that are sufficiently delinquent. Accounts over 90 days delinquent may be submitted to a collections agency and clients will be responsible for all reasonable collection fees and interest.

There is a charge of \$25 for checks returned due to insufficient funds.

### **INSURANCE**

Hartstein Psychological Services does not participate on any insurance panels. Many insurers that offer an out-of-network benefit will reimburse for services received at Hartstein Psychological Services. Monthly billing statements will be provided for submission to your insurance company.

While Hartstein Psychological Services is glad to assist you in submitting the proper forms to assist with reimbursement, please be reminded that you are ultimately responsible for any fees incurred at the time services are rendered.

For additional clarification, please refer to Hartstein Psychological Services' Financial Agreement.

### **APPOINTMENTS**

Please arrive on-time for all scheduled appointments.

If you must cancel an appointment, you must provide **ONE BUSINESS DAY'S** notice (24 hours in advance). We reserve the right to charge your usual session fee if you do not provide **ONE BUSINESS DAY'S** (24 hours) notice, and almost always charge for missed appointments. If you must cancel on short notice, please communicate that to us, as soon as possible.

Please refer to Hartstein Psychological Services' Cancellation Policy for further information.

### **CONFIDENTIALITY**

Anything discussed in therapy is held in the strictest of confidence. This confidentiality is required by the American Psychological Association, codes of ethics, the Health Insurance Portability and Accountability Act (HIPAA) and is protected under the laws of the State of New York for licensed psychologists and those supervised by psychologists.

There are, however, a few exceptions:

- Your therapist may need to consult with a supervisor or other professional to better assist you.
- The associates of the practice may have access to your records for administrative purposes.
- If you are looking for reimbursement from an insurance company, certain information, including dates of treatment and diagnosis may need to be furnished in order for you to obtain reimbursement.
- We routinely thank referral sources for their belief in the services offered by Hartstein Psychological Services.
- We may need to communicate with your primary care physician, or other members of your treatment team, and will obtain consent as early as possible to facilitate these communications.
- We are mandated reporters and, as such, if we learn of child or elder abuse or neglect, we are required to make a report to the appropriate New York State agencies.
- In the case of serious threats of harm to another person, we may take protective action. We are ethically permitted to release information to prevent acts of suicide and homicide.

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- Finally, if you file a complaint or lawsuit against us, we may disclose information in our defense.

With these expectations, what you say to your therapist is considered legally privileged communication. This means that nothing discussed in your therapy sessions will be revealed without your explicit permission. Please refer to the full HIPAA policy for additional information.

**CLINICAL RECORDS**

Clinical records are maintained and, except in unusual circumstances that involve danger to yourself or others, you may examine and/or receive a copy if you request it in writing. The request must be signed and dated no more than 60 days prior to receipt. Because these are professional records and can be misinterpreted by, or be upsetting to, untrained readers, we recommend that you review them only in our presence or have them forwarded to another mental health professional so you can discuss the contents.

We charge a copying fee for all requested records (\$1 for each of the first 10 pages, 50¢ per page for pages 11-50 and 20¢ per page for any above 50), a \$15 record search fee, and postage.

If we refuse your request for access to your records, you have the right to a review, which we will discuss with you upon request.

In addition, HIPAA grants you certain rights regarding your clinical record as detailed in the *Notice Form* you received.

**AGREEMENT**

Hartstein Psychological Services looks forward to providing the best clinical service to you and your family. By signing below, you acknowledge that you have read, understood and agree to abide by the above policies.

\_\_\_\_\_  
Print name of client

\_\_\_\_\_  
Print name of client's representative (for clients under 18)

\_\_\_\_\_  
Signature of client (or representative)

\_\_\_\_\_  
Date

\_\_\_\_\_  
If signed by client's representative, state representative's authority to act on client's behalf