

Endeavor Psychology & Consulting



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CONSENT FOR SERVICES

This form explains policies and procedures for the services provided by Endeavor Psychology & Consulting. Please read it carefully and make note of any questions.

Evaluations

The evaluation process includes several steps:

1. An interview with the client and parent(s)/guardian(s) (if applicable) to review background information, clarify concerns, discuss the evaluation process, and obtain informed consent.
2. In-office testing sessions. Testing can take up to 6-8 hours to complete, depending on the evaluation. This can be done in one full-day appointment, or in smaller appointments.
3. Administration of questionnaires and, with your permission, gathering of information from teachers, counselors, physicians, and others who can provide helpful information.
4. A feedback session lasting between 30 and 60 minutes to review results and discuss diagnoses and recommendations.
5. A written report summarizing the findings of the assessment.
6. Time to complete the entire evaluation process can vary widely depending on the type of evaluation and complexity of a client's presentation. Typically, however, most evaluations can be completed start to finish in 10-25 hours.

You have the right during an assessment to take a break or discontinue at any time in the unlikely event that you experience discomfort or distress.

By signing this document, clients agree to make every reasonable effort to provide complete and accurate information when requested, including copies of previous evaluations and acknowledgement of current or anticipated involvement in related litigation. Failing to provide information about prior assessments may affect the validity of current results and diagnoses. Please discuss questions or concerns you have about this policy **before** the evaluation begins.

Benefits and Risks of Psychological Evaluation

Primary benefits:

- Insight into learning skills and needs.
- Possible explanations and diagnoses.
- Recommendations for services, treatment, modifications, and accommodations.
- A written report that can be used to help access services.

Primary risks:

- Discomfort during the evaluation process. Most clients have a positive experience, but some may feel anxious, frustrated, or embarrassed. I have many years of experience helping clients feel comfortable and will do my best to put you or your child at ease.
- The evaluation may not yield a specific diagnosis and you may still have questions after the evaluation is completed. I provide services related to my area of expertise and my assessment may not confirm previous assumptions or diagnoses. I will do my best to address any continuing issues with recommendations and referrals.
- You may not agree with my conclusions or recommendations. It is your decision whether or not to follow my suggestions.

Cancellation policy and late arrivals

Please contact me to cancel your appointment as soon as possible. If you cancel less than 48 hours before your appointment, you are subject to a cancellation fee of \$200 per session. This may be waived for unusual circumstances, for example, in the event of a sudden illness.

Please contact me if you will be more than 15 minutes late. If you arrive late for a scheduled testing appointment, only the remainder of the testing session will be available.

In the case of inclement weather, I will make every effort to phone or email you to reschedule the appointment.

Confidentiality

In most situations, I can only release information about you or your child if you sign a written authorization form. There are some circumstances that require only that you provide written, advance consent. Your signature on this Agreement provides consent for:

- Consultation with other professionals, if necessary. I will make every effort to avoid revealing your identity. The other professionals are also ethically bound to keep your information confidential.
- If a client threatens to harm himself/herself, I may be obligated to seek hospitalization, or to contact family members or others who can help provide protection.

Limits of Confidentiality

There are some situations in which I am permitted or required to disclose information without either your consent or authorization. These are highly unusual, but nevertheless are possible:

- Under court order or as part of legal proceedings. If you are involved in or contemplating litigation, you should consult with your attorney to determine whether a court would be likely to order me to disclose information.

- I may disclose relevant information regarding that client in order to defend myself against complaints or lawsuits.
- If I suspect abuse, neglect, or exploitation of a child or vulnerable adult, I may be obligated to make a report and provide additional information if requested.
- If a client communicates a specific threat of immediate serious physical harm to another person or people, and I believe they have the intent and ability to carry out the threat, I am required to take protective actions. These actions may include notifying the potential victim or their guardian, contacting the police, or seeking hospitalization for the client.

Should any of the above events occur, I will make every effort to fully discuss it with you before taking action and I will limit my disclosure to what is necessary.

Please note: This list is not exhaustive. The laws governing confidentiality are complex. In situations where specific advice is required, formal legal advice may be needed.

Minors

If you are under 18 years of age, please be aware that the law provides your parents with the right to examine your records. If I feel there is high risk that you will seriously harm yourself or others, I will notify them of my concern. Before sharing this information, I will discuss the matter with you and will do the best that I can to resolve any objections that you might have about the information I am about to discuss.

Client Rights

- Clients 13 years of age and older have a right to refuse treatment or discontinue services at any time.
- Clients have the right to change providers or receive a referral to another provider.
- Clients have a right to ask questions concerning the findings of their evaluation, and the right to raise questions about the provider, the treatment approach, and progress made at any time.

Questions or Concerns About Your Psychologist

If you have questions or concerns about your psychologist, information and disciplinary recourse is available by contacting the Department of Health, Examining Board of Psychology, P.O. Box 47868, Olympia, WA 98504-7868.

Professional fees

Unless otherwise stated, evaluation fees as outlined on the financial agreement are all-inclusive.

Separate, additional services, such as consultation or record review that are outside the scope of the evaluation will be billed at \$200 per hour, with the exception of legal proceedings. I will obtain your prior approval for any additional fees, including a maximum number of hours, prior to providing these services.

Insurance Reimbursement

Endeavor Psychology & Consulting does not contract with any insurance companies, however clients may be able to use their out-of-network insurance benefits to pay for testing/assessment. Insurance companies typically will reimburse clients for a portion of the total costs.

While we do not contract with insurance companies, we know many people have questions about

insurance. We can provide you with an insurance claim form, or “superbill,” including the description of services provided, procedure codes, service dates, and diagnosis that you can submit to your insurance and *may* be able to receive a reimbursement. Health insurance coverage and limits can be confusing, please call your provider to confirm your coverage. We strongly encourage you to contact your insurance company *prior* to services to ask about their reimbursement rates. For psychological and neuropsychological testing, we use CPT codes 96116, 96121, 96130, 96131, 96132, 96133, 96136, and/or 96137.

Professional Records

An unredacted comprehensive written report is included in the charges for the evaluation. If the report must meet specific requirements, please communicate those to me before the assessment. Any other documentation, such as report summaries or other alternatives to a comprehensive report, may incur additional charges.

You have a right to a report of my findings but not to raw data/test protocols, consistent with test security requirements and professional standards of the American Psychological Association.

Please let me know before the assessment if there are deadlines I should be aware of.

Electronic Communication Policy

Email Communications: I subscribe to a HIPAA-compliant email encryption service. However, if you choose to communicate with me through email, you are acknowledging acceptance of the risks inherent in electronic communications. It is preferable to discuss confidential clinical matters by phone or in person.

Text Messaging: With your permission or if you text me first, I will send text messages for administrative purposes such as setting or canceling appointments. I also subscribe to a HIPAA-compliant phone service.

Social Media: I do not communicate with or contact clients through social media platforms like Twitter, Instagram, LinkedIn, or Facebook.

**I HAVE READ THE ABOVE INFORMATION. I UNDERSTAND AND FULLY
ACCEPT THE CONDITIONS AS STATED.**

Parent/Guardian Signature (if client is
younger than 18 years old) Full Name

Parent/Guardian Signature (if client is
younger than 18 years old) Signature

Date

By signing the space below, you are saying that you agree and understand that this electronic signature is the legal equivalent of your manual/handwritten signature and you consent to be legally bound to this agreement.

Client Signature

Date