

Practice Policies

The following summarizes my practice policies. Please feel free to discuss any questions with me and keep the first five pages for your reference. Please return the final signature page (completed) to be placed in your chart.

The policies summarized here have been put in writing to avoid misunderstandings so we can focus on treatment.

CONFIDENTIALITY

The confidentiality of all communications between a client and a psychiatrist is protected by law and I, as your psychiatrist, cannot and will not tell anyone else what you have discussed or even that you are in treatment with me without your permission. In most situations, I can share information about your treatment with whomever you choose if you sign a written release authorizing me to do so. You may revoke that permission in writing at any time. With the **exception** of certain specific situations described below, you have the right to confidential treatment. If at all possible, I will make every attempt to inform you when I am legally bound to take action that would reveal information about your treatment. The legal exceptions to confidentiality include, but are not limited, to the following:

1. If there is good reason to believe you are threatening serious bodily harm to yourself or others, I may be required to take protective actions, which may include notifying the police or any potential victims, contacting family members, or arranging appropriate hospitalization to ensure the safety of anyone involved.
2. If there is evidence of or good reason to suspect abuse and/or neglect towards children, the elderly, or disabled persons, I am legally required to file report with the appropriate state agency.
3. In response to a court order or when otherwise required by law.
4. As necessary, to make claim on a delinquent account via court/collection agency.
5. As necessary, for emergency medical care to be rendered.
6. Finally, there are times when I may benefit from professionally consulting with colleagues to maximize your care. Your name and unique identifying characteristics will not be disclosed. The consultant is also legally bound to keep the information confidential.

CANCELLATION POLICY

For medication only patients, I require notice of cancellation at least three business days prior to the scheduled appointment. For example, for a Monday appointment, regardless of the time of the appointment, a message would have to be left for me by 6pm on Wednesday of the previous week. When I learn of a cancellation, I will make every

effort to fill the time and if I am able to do so, will not charge for that time. If I am unable to fill the time and the notice is less than the three business days, you will be charged.

For all psychotherapy patients, I charge for all missed appointments that I am unable to fill regardless of the amount of notice. With notice, I am often able to fill the appointment time so I urge you to let me know about conflicts as soon as they arise.

For therapy clients, a set time has been reserved on an ongoing basis and the nature of the kind of therapy I practice requires a level of consistency that this policy promotes. I have also found that this policy works well in avoiding disputes over what qualifies as a justification for missing an appointment. The understanding that you are responsible for all appointments from the beginning avoids confusion in the midst of therapy. Occasional missed sessions are sometimes a part of psychotherapy and will be addressed in therapy and the process can often lead to important insights and improvement. If sessions are consistently being missed, we will have a discussion about whether regular psychotherapy is the appropriate form of treatment for you at that particular time.

BILLING POLICY

Patients with whom I meet at least weekly will be billed on a monthly basis with payment due on receipt of the bill. Accounts overdue for more than 30 days will be charged a monthly late fee of 5% of the total balance overdue. In some cases, sessions will be temporarily stopped, except in an emergency, until payment is received. In addition, accounts overdue by more than 90 days may be turned over to a collection agency.

For patients with whom I meet less than weekly, payment is expected at the time of service for the full amount in the form of cash or check. If payment is to be mailed after the appointment, the account will be subject to the same policies described above.

If there are any questions that arise about payment, I encourage patients or the responsible parties to approach me to discuss what arrangements can be made. I understand that situations may come up that could delay payment and I am willing to work out specific situations. I have instituted the policy above because I have found myself spending an inordinate amount of time trying to collect payment and in some cases not being paid at all.

INSURANCE

I do not participate in any insurance plans. Many patients submit my bills to their insurance provider (please see below for Medicare patients) for reimbursement. Because you are making payment in full to me, you should direct your insurance company to make payment directly to you. Missed appointments or cancellations may appear on bills and patients should be aware that insurance companies sometimes do not reimburse for these appointments. You are still responsible for full payment.

MEDICARE PATIENTS

I do not participate in Medicare and am only able to provide treatment to Medicare eligible patients by entering into a specific treatment contract with any Medicare eligible patient. It is the responsibility of the patient to notify me of their Medicare eligibility and keep their contracts with me up to date (they need to be renewed every two years). The contracts stipulate that the patient understands that I am not a Medicare provider and that they MAY NOT submit my bills to Medicare for reimbursement.

COMMUNICATION POLICY

All routine matters of communication should primarily be directed to my office telephone and the confidential voicemail there are 212-721-6823.

For any matters that require my attention on the same day (for example, if you are out of medications or cannot make your appointment either that day or within the next few days), I can also be reached on my mobile phone at 646-369-2245. I am generally able to retrieve messages at this number within a few hours, but this number should NOT be relied on for emergencies. Any emergent issue should be treated as such and patients should call 911 or proceed to a nearby emergency room.

I will make every effort to return messages in a timely fashion. In exchange for having access to me on a full time basis (unless I am on vacation) I request that patients use my mobile phone only for truly urgent matters. Especially on holidays, nights and weekends, please ask yourself if the question can wait until the work week. If the answer is no, then I want you to go ahead and contact me. I prefer to handle time sensitive issues as soon as possible. However, if the answer is yes, I appreciate the courtesy of using my office line or waiting until our next appointment.

The office phone should be considered the only reliable mode of communication. However, in the course of practice, it is sometimes convenient to use email or text messages to exchange non-urgent messages. While convenient, these modes of communication are not always reliable or private. Use of either email or text messaging should be done at your own risk. Neither email nor text messaging is as private as voicemail. Also, email and text messaging are not as reliable as voicemail so if you want to make sure that your message is conveyed, please use the telephone.

With the above stipulations, I am open to communicating via email or text message for certain issues, but I reserve the right to restrict their use if in my opinion it is not contributing to my ability to deliver the highest quality care.

MEDICATION REFILL POLICY

Medication refills should be handled during regularly scheduled appointments. As a patient, you have the primary responsibility for keeping track of your medication supply and refills. If you do find that you will run out of medications prior to your next scheduled appointment, you should contact me to call in a refill, but this should be the exception rather than the rule. Please note that consistency with medications is important so do contact me even if you will only be short by a day or two. Though I prefer

handling refills at appointments, I would much rather handle refills by telephone than have you miss doses of your medication.

For patients that I see infrequently, I may request that we schedule a follow-up appointment before agreeing to provide a refill, especially if there are any clinical changes.

Patients should factor in their own travel schedules when keeping track of their medication supply as other states have varying policies about telephone refills. If you do find yourself away from home without your medication, you should contact me so that we can try to resolve the situation.

VACATION/HOLIDAY POLICY

I do not have any set vacations. When I do schedule time away, I will do my best to give ample notice. During time away, I will arrange for my practice to be covered by another psychiatrist for emergencies and the covering doctor's contact information will be available on my office voicemail. Non-urgent matters should be held until I return.

I observe most major holidays. Unless I indicate otherwise on the outgoing voice message on my office line, I am available for urgent matters on holidays. I ask my patients to make every effort to anticipate routine questions, such as medication refills and appointment questions, so that they can be addressed before or after holidays or weekends.

TELEPHONE CHARGES

My default policy is to not charge for telephone contact outside of sessions. I am happy to handle routine questions and brief follow up by phone. When appropriate, I will ask that we schedule a face to face appointment so that I can evaluate the situation properly.

When phone contact becomes excessive or inappropriate in my estimation, I may charge for the time and/or per phone call.

This policy is in place to limit inappropriate calls, not to increase charges or to conduct treatment by telephone.

TREATMENT EXPECTATIONS

The goal of treatment is understood to be for the treatment of psychiatric symptoms and to optimize feeling and living better. I will attempt to understand your individual goals and offer my professional advice with the aim of helping you achieve those goals and alleviating any symptoms.

Unfortunately there is no guarantee with psychiatric treatment. In some situations symptoms can get worse before they get better and in rare cases not improve at all.

As a patient, your responsibilities include scheduling and keeping appointments as directed by me. Keeping appointments means arriving on time, setting aside the

appropriate amount of time, and ensuring that we are not interrupted. This means that except in unusual circumstances, we should not be interrupted by calls or messages on your cellular telephone and you should not expect to leave until the appointment time is over.

Treatment, especially psychotherapy, can be very emotional. You are encouraged to express your feelings fully but to be respectful and appropriate when doing so.

You are expected to keep me informed about other medical issues, treatment with any other providers (medical doctors, therapists, herbalists, acupuncturists, nutritionists, basically any other treatment from ANY provider), test results, and of course any new symptoms or side effects. Having this information greatly enhances my ability to provide the best possible care.

You are expected to obtain diagnostic tests or see consultants and return my phone calls in a timely fashion. At times, if I do not hear back from you, I may contact your designated Emergency Contact for help in locating you. If I still cannot reach you or you are unwilling to pursue what I consider necessary testing or treatment or come in for follow up, I may terminate treatment as I cannot take appropriate care of you without your input and participation. In such cases, I will offer other alternatives for psychiatric treatment. I will be available for emergencies for a specified finite period of time. Once treatment has been terminated, a new evaluation may be required before I agree to start treating you again.

