## Amber Bauerle, LICSW Vantage Point Counseling, Inc.

18 W. Mercer St. Suite 360 Seattle, WA 98119 (206)962-0335 amberb@vpcounseling.org

## **Disclosure & Notice of Office Policies**

Amber Bauerle, LICSW is a clinical member of the National Association of Social Workers (NASW). She received a Bachelor's Degree in Psychology and a Master's Degree in Social Work focused on psychotherapy at Eastern Washington University. She has been working as a mental health treatment provider for over a decade. Ms. Bauerle is a Licensed Independent Clinical Social Worker, license #LW60058539. Her work is guided by the ethical codes of NASW and the Washington State Department of Health codes of practice. She is also a Department of Health approved supervisor providing training to new therapists in the field.

**METHODS/TRAINING**: Ms. Bauerle is an interactive solution focused therapist and specializes in developing individualized treatment to meet each client's needs. Cognitive behavioral therapy, narrative therapy, psychodynamic, EMDR and Gottman methods are of the most commonly used.

**CONFIDENTIALITY:** Information discussed during therapy sessions is held in strict confidence. Personally identifying information will not be disclosed without the client's written permission.

**Exceptions to confidentiality:** the law mandates that information be reported if a client reports child abuse, the abuse of a disabled adult, or threat to harm self or others. Client information may also be disclosed for the purpose of billing or if subpoenaed by a court or other legal authority. **Please review and sign the Notice of Privacy Practices (HIPAA) form.** A copy will be provided to you at your first visit.

**CANCELLATION POLICY:** Your appointment time is reserved for you, therefore, you will be charged a fee of **\$80** for a missed appointment if you have failed to notify Ms. Bauerle within 24 hours prior to a scheduled appointment time. (Note: Insurance plans will not pay for missed or late-cancelled sessions). If Ms. Bauerle is responsible for the cancellation, your next session will be free of charge.

**INSURANCE & BILLING**: Vantage Point Counseling's billing service, NW Clinical Billing, will first bill insurance companies and then clients the remaining balance. Private pay fees and copayments are due at the time of each session. Unpaid balances of client accounts beyond 60 days may be transferred to a collection agency. It is each patient's responsibility to keep Ms. Bauerle informed of any insurance coverage or address change.

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**COUNSELING/SERVICE FEES:** The fee for counseling will be \$120 per 55 minute session, \$150 for intake 55 minute session. If using insurance, these fees will be billed to your insurance and you will be responsible for the copayment or deductible amount payable at the time of our session.

Mental health **consultation/supervision** will be provided at \$100 per hour. Payments are due at the beginning of each session.

**Telephone calls** (more than 5 min.) related to clinical issues or are more than to discuss scheduling will be billed to you at the prorated private rate of \$120 (based on length of call).

**IN AN EMERGENCY**: Please note that due to a full schedule, Ms. Bauerle will not be available for clinical emergencies, either within business hours or after hours. In the case of a clinical emergency, please call the King County Crisis Line (206-461-3222), call 911, or go to a hospital emergency room. Once you are able, please also inform Ms. Bauerle of the emergency that has occurred.

**CORRESPONDENCE**: Per ethical guidelines, text and email use is restricted to scheduling purposes, not therapy or therapeutic feedback.

## **Treatment Agreement**

My signature below indicates that I have read and accepted treatment policies of Amber Bauerle, LICSW of Vantage Point Counseling, Inc. I have also completed and signed the Client Registration form and the HIPAA Privacy Notice on this date. I have had an opportunity to ask questions to clarify my understanding of the information. I understand that I have the right to refuse treatment and the right to choose a practitioner and treatment modality which best meets my needs.

Client Signature	Date
Second Client Signature	Date
 Therapist Signature	Date