

**PROFESSIONAL DISCLOSURE AND ADMISSIONS FORM**

**QUALIFICATIONS AND EXPERIENCE**

I am a Texas Licensed Professional Counselor and Supervisor (06991), and Licensed Chemical Dependency Counselor (2077). I now have over 30 years experience working as a professional counselor in many different capacities. I am both well trained and have experience in most issues related to mental, behavioral health and substance use disorders. Specialty areas include trauma and addiction recovery, dual diagnosis disorders, depression, bipolar disorder, borderline personality symptoms, codependency and caregiving, aging, health concerns, anxiety and trauma. During our first session together we will be determining if I am the right counselor for you to be working with.

**CONSENT TO TREATMENT**

This client authorizes Pamela Gates to perform mental, behavioral health or addiction counseling.

If the client is a child under age 18, the parent or legal guardian consent for the child to receive counseling services from Pamela Gates. There will be periodic parent consultations during which information will be given regarding the progress of therapy. During these consultations the parents or guardians and I will be discussing what can be done to assist the child in making positive, healthy changes. Parent's are encouraged to respect their child's confidentiality and privacy. Parents may be assured that I will encourage your child to share critical information and feelings with you.

**APPOINTMENTS**

I offer a free phone consultation to discuss what your needs are and determine if you feel comfortable talking with me. Sessions run 50 minutes in length unless we make arrangements for more or less time. We will agree upon days and times that we will meet and how often. Typically, clients attend weekly, particularly when we are starting our work together. However, based on needs, time, and resources we can adjust the schedule together.

**CANCELLATION POLICY**

When you schedule an appointment, that time is reserved for you. If you cannot attend your appointment, please call and cancel at least 24 hours in advance and there will be no charge. With shorter notice, you are agreeing to pay for the

**PAMELA GATES MA, LPCS, LCDC, ADCIII**

time you reserved, and you will be billed a “no show/cancellation fee”. This fee is not covered by insurance policies so please let me know if you can’t keep an appointment. Emergency situations can be discussed and exceptions can be made. If I have an opening later in the same week you may take that time and the “no show/cancellation” fee will be waived..

**PROFESSIONAL FEES**

Payment is due at the end of each session. For individual and family therapy, the rate is \$150.00 per hour. Sliding scale rates are also available. A \$25.00 fee will be due for returned checks. Any court costs will be the responsibility of the client.

**INSURANCE**

I am currently a provider for Blue Cross/Blue Shield PPO and Advantage plans and a provider for most all Humana products. If you have an insurance plan, that plan should be contacted directly to obtain their policies regarding mental health coverage, procedures for reimbursement, and the percentage they will reimburse you. I am happy to contact them on your behalf. In most cases, I will bill the insurance company for you and accept your copay once I have verified insurance and any deductible has been met.

**CONFIDENTIALITY**

All communication between counselor and client are kept confidential with the following exceptions:

- \*disclosure of child or elder abuse in the past or the present
- \*if I determine that you are a danger to yourself or others
- \*in the event that client records (verbal or written) are subpoenaed by court
- \*in the event a client is in need of emergency medical services

I am the designated HIPPA safety assurance person for my private practice. I will conform to all state and federal billing laws concerning electronic and mail billing practices. Please refer to the Notice of Privacy Practices.