



NOTICE OF OFFICE POLICIES AND PROCEDURES, *EFFECTIVE 02/21/2022*

PURPOSE OF THIS INFORMATION

In order for Collaborative Counseling Center to provide the best care possible, we want our patients to have as much pertinent information as possible. If you have any questions or concerns about the healthcare or business practices of this office, please feel free to discuss them with our Clinicians and Physicians.

PRIVACY AND RELEASE OF INFORMATION

Services you receive in this office are confidential, except in the circumstances listed below:

1. Threats of harm to self or others
2. Abuse of a child, vulnerable adult, or developmentally disabled person
3. A court order to release information
4. Subpoena of treatment records by an attorney. If you do not want this information released, you must obtain a protective order from the court within fourteen (14) days.
5. If you will be applying your health insurance benefits, we may be required to provide information to your health plan, including some or all of your record of treatment, in order for your carrier to pay for services. By signing the Acknowledgement of Receipt of Office Policies and Procedures form you consent to release of that information to your health plan. *Psychotherapy notes are handled separately under HIPAA and have additional protections.*
6. If you are party to child custody litigation at any time in the future, the court may order release of information about your treatment in this office.
7. In some instances, as provided by the state law of Maryland, information about your healthcare may be exchanged with other healthcare professionals involved in your treatment.

In circumstances other than these, CCC will not release information about your treatment without your authorization.

EMERGENCY CONTACT

Messages left on voicemail are retrieved regularly and calls are returned as soon as possible. If you need more rapid attention for your own or someone else's safety, do not delay while waiting for me a Clinician to return your telephone call. *In a mental health emergency, please call 9-1-1 or report to the nearest hospital emergency room.*

PATIENT RECORDS

An electronic record (file) is kept of services you receive in this office. You have a right to see the record and receive a copy of it upon request. You may ask that factual errors in the record be corrected. You may authorize in writing that copies of the record be released to entities you designate, at your expense, according to charges stipulated by the state law of Maryland. Under certain circumstances where seeing the record may put a patient or other person at risk, CCC may redact certain information in the record and/or require that you review the record



COLLABORATIVE COUNSELING CENTER

Working together to inspire change and promote growth

5560 Sterrett Place Suite 201

Columbia, MD 21046

T (443) 546-4000 F (443) 546-4005

www.CollaborativeCounselingCenter.com

In consultation with another healthcare provider. You may receive an accounting of non-routine uses and disclosures of your record. You will not be considered an active client at CCC if you have not been seen for one year from the date of your last visit.

You may receive a free copy of your record and a free accounting of non-routine disclosure(s) each year. Please contact Collaborative Counseling Center to obtain these documents. We require your request to be in writing:

Collaborative Counseling Center
5560 Sterrett Place, Suite 201
Columbia, MD 21044

If you have questions, please contact our office at (443) 546-4000.

SECURITY PROCEDURES

CCC makes reasonable efforts to prevent access and disclosure to unauthorized personnel. CCC keeps an ongoing log of potential risks and the physical and electronic safeguards implemented to limit these risks. CCC requires all of its clinicians and staff to abide by all applicable privacy regulations. CCC utilizes a surveillance and security system to keep clients, families, and staff safe.

INSURANCE BENEFITS AND PATIENT RESPONSIBILITY FOR FEES

It is the patient's and the patient's guarantors responsibility to pay for all mental health and psychiatric services, in full, at the time of each visit. It is also your obligation to submit the provided Superbill to your insurance company for potential reimbursement for out of network mental health services. If charges are denied by a health insurance plan they become entirely your responsibility, even if you had understood from your health insurance plan that the charges would be paid by them. Only your health insurance plan can describe your benefits to you or verify provider eligibility. We advise you to contact your health insurance plan directly for verification. CCC Clinicians will provide you with requested documentation in a timely fashion. We do not accept payments from insurance companies.

FEES AND PAYMENT

Payment is due in full at the time services are provided unless prior arrangements have been made. Billing and patient accounts are administered by Collaborative Counseling Center. Please telephone CCC directly with any questions or concerns about your account statement.

UNPAID BILLS

It is important that you discuss with CCC any financial hardship that you may have. Doing so may allow us to arrive at a mutually agreeable payment plan that allows the continuation of your treatment. If this cannot be accomplished, seriously delinquent accounts may be referred to a collection agency and we may have to terminate our relationship as provider and patient. Information necessary to effect collection will be released to the collection agent. Should it become necessary to file suit in this context, you agree to pay reasonable attorney fees. A service fee of 3% will be charged on balances more than thirty (30) days past due.



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LATE CANCELLATIONS AND MISSED APPOINTMENTS

Failure to keep a scheduled appointment will result in a charge for the full fee of the scheduled appointment, unless you cancel **at least 24 business hours** prior to the appointment time. This allows CCC Clinicians the minimum amount of time to offer the appointment to others in need of treatment services.

GRIEVANCE PROCEDURES AND COMPLAINTS

If you have any questions or concerns about administrative or business matters in this office, please discuss them with your Clinician directly. We may involve the Clinical Director, Emily Greenberger, LCSW-C, if it would be mutually beneficial to do so.

If you have any questions or concerns about your treatment, you are encouraged to discuss them with your Clinician. In addition, or instead, the following avenues are available:

1. You may contact your health insurance plan or behavioral health benefit manager;
2. If you feel the problem is serious and/or you have not reached resolution through one of the avenues above, you can file a complaint with the Maryland Department of Health and Mental Hygiene. Contact information can be found on the DHMH website www.dhmh.maryland.gov
3. You may also file complaints regarding privacy practices to the Secretary of the U.S. Department of Health and Human Services.

FEES

All provider services and fees are listed on our website by visiting www.collaborativecounselingcenter.com. All fees are subject to change; however, any changes will be discussed with you.