

Information for Clients

Welcome to my practice! I appreciate the opportunity to be of help to you. This document contains important information about treatment, confidentiality, fees, and office policies, including a summary of your rights under the Health Insurance Portability and Accountability Act (HIPAA). Please read it carefully. If you have questions, your therapist will be happy to discuss them with you. You will be asked to sign a form indicating that you have received, read, understood, and agreed to this information.

HIPAA is a federal law that provides privacy protections and patient rights regarding the use and disclosure of your Protected Health Information (PHI). This Agreement serves as the Notice of Privacy Practices required by HIPAA. By signing this document, you enter into an agreement with Alina Tsirelson, LPC. You may revoke this Agreement in writing at any time, except where we have already taken action in reliance on it, where obligations imposed by your health insurer are involved, or where you have outstanding financial obligations to this practice.

Important Points

Please read this entire document. The following highlights are especially critical:

- Always ask if you have questions or do not understand something.
- Confidentiality and its limits are important - please read that section carefully, especially if your child is being treated.
- Payment is required at the time of service unless other arrangements have been made in advance.
- Cancellations with less than 48 hours notice are charged a \$50 fee. Cancellations with less than 24 hours notice are charged the full session rate (\$180 private pay, or the insurance-allowed amount).
- This practice is not an emergency service provider. In an emergency, call 911 or go to the nearest emergency room or crisis center.

About Psychotherapy

Psychotherapy is a partnership between you and your clinician that requires your active involvement. At the beginning of treatment, you may be asked to complete questionnaires, practice new skills, keep records, and engage in exercises between sessions. Change takes time and effort.

Most clients attend therapy weekly at the start of treatment. Sessions may become less frequent as progress is made. If you wish to stop therapy, it is recommended that you meet with your clinician for at least one closing session to review your progress. Stopping therapy should not be done abruptly.

Benefits and Risks of Therapy

As with any meaningful treatment, therapy carries both benefits and risks. During therapy, clients may experience uncomfortable emotions such as sadness, anxiety, anger, guilt, or loneliness,

and may recall unpleasant memories. In some cases, symptoms may temporarily worsen before improving. These experiences are a normal part of the change process.

Research consistently demonstrates the effectiveness of therapy. Clients often experience relief from depression, anxiety, and fear. They may develop stronger relationships and coping skills, greater clarity about personal goals and values, and an improved ability to enjoy their lives. Even so, there is no guarantee that therapy will produce the desired results for every individual.

Consultations

If you wish for a second professional opinion at any time, or would like to speak with another therapist, your clinician will assist you in finding a qualified provider and will share relevant information with your permission. If it becomes evident that treatment is not progressing, your clinician may recommend that you see a different therapist or specialist. Ethical clinicians do not continue treatment when it is not serving the client.

What to Expect from the Therapeutic Relationship

Licensed Professional Counselors (LPCs) are trained to provide counseling and therapy — not legal, medical, or financial advice. Your clinician will follow all standards and rules set by the Pennsylvania State Board of Social Workers, Marriage and Family Therapists and Professional Counselors.

To protect the integrity of the therapeutic relationship and your privacy, certain limits are necessary. If your clinician encounters you outside the office, they may not acknowledge you in order to protect your confidentiality. Your therapist will not attend personal events such as parties or weddings, and will not exchange gifts with you.

Your therapist may have a presence on social and professional networking platforms. To maintain professional boundaries and protect your privacy, invitations to connect on social media or professional networks will not be accepted. This is standard practice in the mental health field.

It is not standard practice to conduct Internet searches on clients. Your clinician relies on information you share directly. However, in situations involving significant safety concerns, your therapist reserves the right to use publicly available information. This is rare and you are informed of this practice here.

About Confidentiality

Effective therapy depends on trust. Your clinician will be honest with you about your progress, and you are expected to be honest about your expectations, your compliance with any treatment recommendations, and any barriers to care.

Your sessions and records are legally confidential. A signed release-of-records authorization is required before any information about you — including confirmation that you are a client — can be shared with anyone outside this practice, except as noted below or as required by law.

The following are the most common situations in which confidentiality may not be protected:

1. Court-ordered evaluation or treatment: If you were referred by a court, the court expects a report. You are encouraged to speak with your attorney and discuss with your therapist what information you are comfortable sharing before your first session.

2. Legal proceedings: If you are involved in a lawsuit or criminal matter and disclose your treatment, your therapist may be ordered by the court to provide your records. Please consult your attorney.
3. Threat of harm: If you make a credible threat to harm yourself or another person, your therapist is required by law to take protective action, which may include notifying the intended victim and/or contacting authorities.
4. Suspected child abuse: Your therapist is a mandated reporter under Pennsylvania law. If there is reasonable suspicion that a child has been or is being abused, a report must be made to the appropriate authorities — regardless of whether the child is a direct client of this practice. This duty applies even if an adult discloses that they have committed abuse or that a child is currently being abused.
5. Elder abuse and impaired drivers: Your therapist is also required to report suspected elder abuse and, in certain circumstances, may be obligated to report information about impaired drivers to the appropriate agencies.

If a breach of your confidentiality occurs, you and the U.S. Department of Health and Human Services will be notified as required by HIPAA. A breach is defined as the unauthorized release of Protected Health Information without legal authority, unless the risk of harm is assessed to be low.

Your therapist may consult with other licensed professionals for the purpose of ensuring quality care. These consultants are bound by the same confidentiality obligations. Your name will not be disclosed, and only the minimum necessary information will be shared.

Marketing uses of your PHI, sale of PHI, and most disclosures of psychotherapy notes require your explicit written authorization. Uses or disclosures not described in this notice will only occur with your signed consent. If you are self-pay, you have the right to restrict information shared with your insurance company.

You have the right to receive a copy of your Protected Health Information in an electronic format, and may designate a third party to receive such information through a written authorization.

Please also be advised: do not disclose the name or identity of any other client you may encounter in connection with this office.

Your Rights Under HIPAA

HIPAA grants you the following rights with respect to your Protected Health Information:

- Request amendments to your records
- Request restrictions on the disclosure of your records
- Request an accounting of disclosures of your PHI
- Specify where and to whom protected information is sent
- Have complaints about privacy practices documented in your records
- Receive a paper copy of this Agreement and our privacy policies
- Access your records in electronic format

Your therapist will be happy to discuss any of these rights with you. A full description of your rights is available upon request and posted in the office.

Your Records

This practice maintains two types of records as required by HIPAA: your Medical Record and your therapist's Psychotherapy Notes.

Your Medical Record includes your reasons for seeking therapy, diagnosis, treatment goals and progress, medical and social history, billing records, and any reports or communications sent to third parties including insurance carriers. You may request a copy of your Medical Record in writing at any time, subject to limited exceptions involving safety concerns. If a request is denied, you will be informed of your right to appeal.

Your therapist's Psychotherapy Notes are a separate, private working document used by your clinician to support your treatment. These notes are kept apart from your Medical Record and are not accessible to insurance companies. Insurance companies cannot require you to authorize release of Psychotherapy Notes as a condition of coverage, and cannot penalize you for refusing.

Because clinical records contain professional language and may be misunderstood out of context, you are encouraged to review them with your therapist or another mental health professional. If you need records shared with another provider, you will be asked to sign a release specifying what is shared, with whom, and for what purpose. If you are in family or couples therapy, all adult participants must sign any release of those shared records.

Records are stored securely. In rare circumstances, your therapist may temporarily withhold portions of your record if disclosure could be harmful to you.

About Your Appointments

Sessions are typically 45 to 60 minutes, scheduled once or twice weekly at the start of treatment. Please discuss scheduling frequency with your therapist. You are encouraged to book appointments well in advance to secure preferred times.

Your appointment time is reserved exclusively for you. If your therapist is running late, you will receive the full session time. If you arrive late, the session will end at the scheduled time.

Cancelled appointments disrupt your progress and result in lost time that cannot be offered to other clients. Please provide as much notice as possible when you need to cancel.

The following cancellation and missed appointment policy applies:

- 48+ hours notice: No charge.
- Less than 48 hours but more than 24 hours notice: A flat fee of \$50 will be charged.
- Less than 24 hours notice or no-show: The full session rate will be charged — \$180 for private pay clients, or the insurance-allowed amount for insured clients, unless a different rate has been agreed upon.
- Missed appointment fees are not covered by insurance.
- In the case of a documented serious emergency, please notify the office as soon as possible. We will make every effort to accommodate rescheduling without charge in genuine emergencies.

- After 3 missed appointments without adequate notice, the practice reserves the right to decline rescheduling.

You may leave a message at any time via voicemail. Our system records the date and time of your call. Please do not bring young children who require supervision to your sessions, as childcare cannot be provided.

Fees, Payments, and Billing

Payment is expected at the time of each session unless alternative arrangements have been agreed upon in advance. You will receive advance notice of any fee changes.

Private Pay Fees:

- Individual/couples/family therapy session (45–60 minutes): \$180
- Extended session (90 minutes): \$250
- Phone consultations: No charge for an initial 15-minute consultation. \$40 per 15-minute increment thereafter, rounded up. Extended consultations with other professionals on your behalf are billed at the standard therapy rate.
- There is no charge for routine calls or emails regarding scheduling or administrative matters.

If a billing arrangement has been established, payment is due within 5 days of receipt. If you anticipate difficulty with fees, please raise this with your clinician as early as possible. Financial concerns that go unaddressed can negatively affect the therapeutic relationship.

Insurance

If you have health insurance, your plan may cover a portion of therapy costs. You are responsible for verifying your benefits before treatment begins. When contacting your insurance company, please ask:

6. Is Alina Tsirelson, LPC an in-network provider on your plan?
7. If not, what are your out-of-network mental health benefits?
8. What is your co-pay or co-insurance for outpatient mental health services?
9. What is your deductible, and how much has been met?

You are ultimately responsible for the full cost of services, regardless of your insurance coverage. If your insurance company disputes or denies a claim, you are responsible for resolving that dispute and for paying any balance owed. If a payment is later issued to this practice as a result of a resolved dispute, it will be returned to you.

Please be aware that your insurance contract requires this practice to provide clinical information to your carrier, including a diagnosis, and in some cases, treatment summaries or portions of your medical record. This information becomes part of your insurer's files and may be stored electronically or shared with entities such as a national medical information databank. This

practice has no control over what your insurer does with this information once it is disclosed. A copy of any submitted report is available to you upon request.

If you have out-of-network benefits, a superbill can be provided to submit for reimbursement.

Telehealth and Electronic Communication

Sessions may be conducted via phone or secure video platform when appropriate. While every precaution is taken to safeguard your information during electronic communications, complete security cannot be guaranteed. You are encouraged to use private devices, secure networks, and be mindful of who may have access to your technology.

Email and phone communication between sessions is available at your discretion for non-urgent matters. Please do not use email or text for crisis communication. If you have concerns about the security of your electronic communications, please discuss them with your therapist.

Contact Information

Your therapist is not available at all times and does not typically take calls during sessions. You may leave a voicemail message at any time. You may also reach your therapist by email at alinaltpc@gmail.com. Please allow reasonable time for a response.

Emergency Contact Information

This practice is not an emergency service. If you are experiencing a mental health crisis and cannot immediately reach your therapist, please use one of the following resources:

- Call 988 (Suicide & Crisis Lifeline - call or text, 24/7)
- Call the community emergency line: 1-800-499-7455
- Call 911
- Go to the nearest hospital emergency department

If an emergency arises during a session, or if your clinician becomes concerned about your safety or the safety of another person, they are required by law to contact a person designated by you (relative, spouse, or close friend) and/or the appropriate authorities. Please provide your therapist with your designated emergency contact person's name and phone number.

Statement of Principles and Complaint Procedures

This practice fully abides by all ethical standards, rules, and laws established by the Pennsylvania State Board of Social Workers, Marriage and Family Therapists and Professional Counselors, and any other applicable licensing and regulatory bodies.

If you are dissatisfied with any aspect of your care, please raise your concerns directly with your therapist as soon as possible. Unresolved concerns can interfere with the therapeutic process. Your therapist is committed to hearing and addressing complaints and working toward resolution.

This practice does not discriminate on the basis of age, sex, gender identity or expression, sexual orientation, race, ethnicity, religion, national origin, marital or family status, place of residence, disability, health status, veteran status, or any other characteristic protected by law. If you believe

you have experienced discrimination, please bring this to your therapist's attention immediately or contact the appropriate licensing board.

If you have a complaint about a privacy violation or believe your HIPAA rights have been violated, you may also file a complaint with the U.S. Department of Health and Human Services, Office for Civil Rights. Filing a complaint will not result in any retaliation against you.