

## TESTING POLICY & AGREEMENT FOR SERVICES

Our team of clinical psychologists and supervised psychometricians provide psychological, neuropsychological and psycho-educational testing for a variety of purposes. We encourage you to read the following details in an effort to make an informed decision about our testing process.

Psychological testing and evaluation can have benefits and risks. These services often lead to better relationships, significant reductions in feelings of distress, and better performance in school or work. On the other hand, since these services often involve discussing unpleasant aspects of your life, you may experience uncomfortable feelings (e.g., sadness, shame, guilt, anger). You may even feel worse for a period of time.

### **A. HOW IS TESTING USEFUL?**

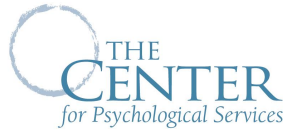
Testing is useful in identifying strengths and weaknesses in the areas of intelligence, academics, social skills, personality, executive functioning and behavior. This can be used for the purposes of diagnosis and treatment planning to improve functioning at home and work. A client can be self-referred, or referred by their physician, their therapist, or specialist, or school, when there are questions that cannot be answered by a clinical interview alone.

### **B. WHAT IS INVOLVED IN TESTING?**

Testing is a process. Testing involves not only the administration of tests, but the scoring and interpretation of them, as well as writing a report that explains the results and provides recommendations for appropriate treatment or intervention.

1. On your first consultation, we will conduct an initial interview to gather thorough background information and discuss current problems or symptoms and goals of testing. During this visit, you will also complete registration information, and discuss the number of tests to be administered, and the amount of time needed for testing (depending on the referral questions).
2. Depending on the purpose of testing, test administration may be completed in one or more sessions.
3. Following test administration, the clinician will need time for scoring, interpretation of the test data, and completion of a thorough report. The clinician will discuss with you the projected length of time for completion. Although this step of the process is time intensive, we strive to complete it in a timely manner. Though the client is not present for this step, there is an hourly charge submitted to the insurance for the time needed to complete the test scoring and report writing.
4. Finally, a follow-up session will be scheduled to review the results and discuss recommendations for appropriate treatment or intervention. This is also billed on an hourly basis.

*Generally, the intake, face-to-face testing, scoring, report preparation and writing, plus the feedback session can total approximately 12 or more billable hours.*



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### **C. WHO HAS ACCESS TO THE TEST RESULTS?**

Your test results are treated with the strictest confidence according to HIPAA laws.

Test results are usually only released to the client (or in the case of minors, to the parents). However, if you need us to send copies of the report to the referring professional (psychologist, neuropsychologist, psychiatrist, primary care physician, therapist, school professional), you must give us written permission by signing a formal release of information.

### **D. IF YOU HAVE A CHILD TESTED, CAN THEY RECEIVE SPECIAL SERVICES AT SCHOOL?**

Very often, psychological, neuropsychological and psycho-educational testing is conducted to identify problems that interfere with a child's learning. Test results may help with school planning. We make every effort to work with the school to explain the testing results and recommendations.

The psychologist can be available to attend meetings at the school and to consult with the school as needed. The charges for these extra services are not covered by insurance and will be charged at our hourly rate.

### **E. HOW MUCH DOES TESTING COST?**

Each client presents unique needs. Therefore, cost varies depending on the test battery needed to complete a thorough assessment. The cost also varies depending on your insurance coverage. This will be discussed with you prior to, or during the initial interview session.

The supervising psychologist and/or psychometric staff has set aside hours with the expectation that you will attend the appointment. If you need to cancel an appointment for testing, a minimum of 24 hours advance notice must be given. If a client fails to provide adequate notice, they will be charged \$150 for the time that has been set aside.

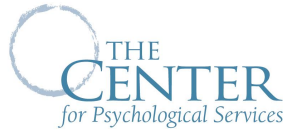
**Cancellations or missed appointment fees are not covered by insurance. The missed appointment fee of \$150 must be paid before rescheduling the testing session.**

### **PAYMENT TERMS AND INSURANCE**

When you initiate services, our Billing Office will obtain a **quote of benefits from your insurance company** and will share that information with you. *(as a reminder, this is a quote of benefits, not a guarantee of payment)*

If our Center is not a participating provider for services in your insurance plan, we will supply you with the invoice necessary to submit to your insurance company. We also offer a "fee for service" option.

Your portion of the session fee is due at the point of service. Please check in with our Front Desk to pay fees before your session; should our Front Desk not be available, kindly pay your tester by the end of your session. If someone from your family is receiving services and not responsible for payment, please be sure payment arrangements are made before the session. We welcome credit cards, cash or check; there is a \$30 charge for returned checks.



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### **CONTACTING YOUR PSYCHOLOGIST/PSYCHOMETRICIAN**

We check our voicemails throughout the business day at the Center and return calls typically within 24 hours except weekends and holidays. When leaving a voicemail or electronic communication, please be specific and brief.

If for unseen reasons, you do not hear from us or there is difficulty in reaching you, and safety is a concern for you or your child, please go to your nearest Emergency Room or call 911 and ask to speak to the mental health worker on call.

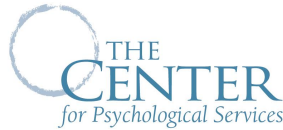
### **LIMITS OF CONFIDENTIALITY**

In general, the privacy of all communications between client and therapist or psychologist is protected by law, and we can only release information about our work to others with your written permission. **But, there are a few exceptions:**

- In most legal proceedings, you have the right to prevent us from providing any information about your treatment. *In some proceedings involving child custody and those in which your emotional condition is an important issue, a judge may order our testimony.* However, such an order is unlikely. We would advise you never to agree to any release of information without first discussing it with us.
- There are some situations in which we are legally obligated to take action to protect others from harm, even if we have to reveal some information about a client's treatment. For example, *if we believe that a child, elderly person or disabled person is being abused, we must file a report with the appropriate state agency.*
- *If we believe that a client is threatening bodily harm to another, we may be required to take protective actions.* These actions may include notifying the potential victim, contacting the police, or seeking hospitalization for our clients.
- *If a client threatens harm to herself/himself, we may be obligated to seek a higher level of care including hospitalization, and/or to contact family members who may help provide protection.* If a similar situation occurs in the course of our work together, we will attempt to fully discuss it with you before taking any action.

The prior situations have rarely occurred in our practice. ***If a similar situation occurs, we will make every effort to fully discuss it with you before taking any action.***

We may occasionally find it helpful to consult with other professionals about a client in order to provide best care. During a consultation, we make every effort to completely disguise the identity of each client. Consultants are also legally bound to keep information confidential. If you don't object, we typically will not tell you about these consultations unless we believe it is important to our work together.



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While this written summary of exceptions to confidentiality should prove helpful about potential exceptions to confidentiality, *it is important to discuss any questions or concerns that you may have as we go along.* We will be more than happy to discuss these issues with you. Please note, however, that we are not an attorneys, and formal legal advice is sometimes warranted because the laws governing confidentiality are quite complex.

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**Signature of parent/guardian (responsible party)**                      **Date**                      **Printed name of parent/guardian**

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**Signature of client to be tested**    **Date**    **Printed name of client to be tested**

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**Signature of psychologist/psychometrician**                      **Date**                      **Printed name of psychologist/psychometrician**

### **HIPAA- NOTICE OF PRIVACY PRACTICES**

Health Insurance Portability and Accountability Act (HIPAA) - *notice of policy and practices to protect the privacy of your health information.*

**Please review the HIPAA policy document and sign & date below that you have read it:**

I, \_\_\_\_\_, do hereby consent and acknowledge my agreement to the terms set forth in the HIPAA information form.

I understand that as part of this organization's treatment, payment, or healthcare operations, it may become necessary to disclose my protected health information to another entity, and I consent to such disclosure for these permitted uses, including disclosure via fax:

I fully understand and accept the terms of this consent.

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**Signature of client to be tested**    **Date**    **Printed name of client to be tested**

*\*\* Parent/guardian of child (12 yrs and younger) must sign HIPAA statement*