



DENISE GRETCHEN-DOORLY, PH.D.

DR. DOORLY

9171 Wilshire Blvd., Penthouse Suite | Beverly Hills, CA 90210 | Phone: (310) 988-9942 | Fax: (310) 273-1818 | [www.drdoorly.com](http://www.drdoorly.com)

---

## OUTPATIENT SERVICES CONTRACT

Welcome to my practice! This document contains important information about my professional services and business policies. I realize this document is long and covers mostly legal and procedural issues regarding psychological treatment. Some of the issues in this document may not seem pertinent to you or the concern(s) for which you are coming in. However, it is my belief that understanding these issues in the beginning will allow us more time and energy to focus directly on your concerns in our sessions. Please read this document carefully and make a note of any questions that you might have so we can discuss them at our next meeting.

### PSYCHOLOGICAL SERVICES

Psychotherapy is not easily described in general statements. It varies depending on the personality of both the therapist and the patient and the particular problems the patient brings. There are a number of different approaches that can be utilized to address the problems you hope to address. Unlike other types of health services, psychotherapy requires a patient to be very active, honest, and open. In order to be most successful, you will have to work on things we talk about both during our sessions and between sessions.

Psychotherapy has both risks and benefits. It is impossible to anticipate every risk to treatment, but some of the most common ones will be described here first. Remembering or discussing unpleasant events, emotions, or thoughts can result in feelings of considerable discomfort or strong feelings of anger, sadness, worry, fear, anxiety, depression, insomnia, etc. Attempting to resolve issues that brought a patient to treatment initially, such as problems with interpersonal relationships, may result in changes that were not originally considered or intended.

Psychological treatment can result in changes regarding behavior, employment, chemical/substance use, education, residency and relationships. Other people in your life, such as family, friends, or co-workers, may view changes that result from your participation in therapy positively and/or negatively. Treatment goals may be achieved easily and swiftly, but often the process can be slow and even frustrating.

Psychotherapy has also been shown to produce benefits for people who undertake it. Therapy often leads to a significant reduction in feelings of distress, better relationships, resolution of specific problems, and improved well-being. But there is no guarantee about what will happen with you.

Our first few sessions will involve a thorough evaluation of your needs. By the end of the evaluation, I will be able to offer you some initial impressions of what our work will include and an initial treatment plan to follow, if you decide to continue. You should evaluate this information along with your own assessment about whether or not you feel comfortable working with me.

Therapy involves a large commitment of time, money, and energy, so you should be very careful about the therapist you select. If you have questions about my procedures, we should discuss them whenever they arise. If your doubts persist, I will be happy to help you to secure an appropriate consultation with another mental health professional or agency. Similarly, if I determine that you might benefit from a treatment procedure that I do not provide, I am ethically and legally obligated to assist you in obtaining that treatment.

## APPOINTMENTS

During our first appointment, I will do a thorough assessment of what you feel is wrong in your life and any symptoms you are experiencing. This first meeting is ninety minutes. I will gather information related to your problem(s) that includes details about your childhood, education, relationships (family, romantic, friends), current living situation, career, and medical history, when relevant. (This is why it is important for you to take the time to complete my “Intake Questionnaire” before our first meeting because it will help me learn about you in an organized and efficient manner). At the end of our first appointment, I will provide you with initial feedback about treatment options, and a sense of how I would approach your concerns. It’s also a chance for us to see how the dialogue feels, and if it seems like a good match.

It can be challenging to gather all of the information to form a complete treatment plan after just one meeting. Some issues are quite complicated and take a longer amount of time to fully explain and understand. It is my goal to make sure you feel that I completely understand what is bothering you so that I formulate an appropriate treatment plan tailored to your individual concerns. This is one of the unique components of psychotherapy when compared to other forms of treatment, including medical treatment. Extra time can be used in psychotherapy to discuss your problem(s) so that your therapist can complete a specialized treatment plan just for you. Therefore, when appropriate, I will continue the assessment during the next 2 to 5 sessions. These subsequent sessions are fifty-minutes (e.g. one appointment hour of fifty-minutes duration). During this time, we can decide whether I am an appropriate person to provide the services needed to meet your treatment objectives.

If psychotherapy is initiated, we will meet for one fifty-minute session per week at a mutually agreed time, although sometimes sessions will more frequent when necessary.

## PROFESSIONAL FEES

Fees vary according to the type and length of the service provided. I am happy to provide the charge for any service not listed in this document. In order to reduce your out-of-pocket costs, I provide a fee reduction for any psychological service when payment is made in full at any time before the completion of the hour of that service for which you are being charged.

### *Initial Consultation (Diagnostic Interview):*

Our very first in-person session will last 1½ hours (90 minutes) so that I can gather as much information as possible about you and the concern(s) you want to work on in therapy. My appointment fee for this special first meeting is \$350. If you pay at the time of the meeting, the charge will be reduced by \$50 and you will pay a total of \$300.

### *Individual Therapy:*

After the Initial Consultation session is completed, my hourly appointment fee for subsequent sessions is \$225. If you pay for an hour of individual therapy at the time of the meeting, the charge will be reduced by \$35 and you will pay a total of \$190.

In addition to weekly appointments, it is my practice to charge my hourly fee on a prorated basis for other professional services you may require such as report writing, telephone conversations which last longer than 10 minutes, attendance at meetings or consultations with other professionals which you have authorized, preparation of records or treatment summaries, or the time required to perform any other service which you may request of me.



### *Patient Litigations:*

If you become involved in litigation that requires my participation, you will be expected to pay for the professional time required even if I am compelled to testify by another party. Because of the complexity and difficulty of legal involvement, I charge double my maximum hourly service fee per hour for preparation for and attendance at any legal proceeding.

### *Disability Assessments:*

I do not conduct formal assessments to determine if a patient is eligible for disability leave, benefits, or services provided by an employer, Medicare, Medi-Cal or other forms of insurance. My policy is to not communicate with or write letters on behalf of the patient for the purpose of obtaining disability benefits.

### *Physical Health and Referrals:*

Your physical health can have a profound influence on your emotional well-being and vice versa. Although my practice specializes in helping people who have been diagnosed with a medical illness, it is important for you to understand that I am not a medical doctor and cannot provide you with medical advice. For this reason, you are encouraged to follow up on referrals for any additional services discussed. I may suggest that you have physical examination to rule out any medical conditions causing or exacerbating your emotional state. I may also suggest that you investigate complementary and alternative medicine procedures as adjuncts to your medical treatment. All suggestions I make should be thoroughly discussed with and approved by a treating physician or other appropriate licensed healthcare provider. It is your responsibility to keep current with your physical condition by receiving medical checkups and/or care.

I strongly believe in coordinating care between psychological services and medical services and will ask you provide me with permission to consult with your doctor(s) and/or other members of your treatment team when necessary.

## BILLING AND PAYMENTS

You will be expected to pay for each session or other service within 30 days of the completion of that service unless we have a written agreement otherwise. Payment schedules for other professional services will be agreed to at the time these services are requested.

For your convenience, payment may be made by check, cash, and some forms of ATM and credit cards. If you choose to have me bill you or any other entity for payment after the time of the service, I do require permission to charge a current credit card if fees are not paid by some other means within 90 days of the service.

If your account is more than 60 days in arrears (a total of 90 days past the date of service) and suitable arrangements for payment have not been agreed to, a late fee of 10% will be added and then again at the end of each 1 month period the fee is not paid. I have the option of using legal means to secure payment, including collection agencies or small claims court. If such legal action is necessary, the costs of bringing that proceeding will be included in the claim. In most cases, the only information that I release about a patient's treatment would be the patient's name, the nature of the services provided, and the amount of money due.

## INSURANCE REIMBURSEMENT

*If you do not plan on seeking reimbursement through your insurance company for my services, then this section does not apply to you (and you can skip to the next section). If you do plan on submitting an insurance claim in order to seek reimbursement, please read this section carefully.*



In order for us to set realistic treatment goals and priorities, it is important to evaluate what resources are available to pay for your treatment. If you have a health insurance policy, it will usually provide some coverage for mental health treatment. I will provide you with whatever assistance I can in facilitating your receipt of the benefits to which you are entitled including filling out forms as appropriate. ***However, you, and not your insurance company, are responsible for full payment of the fee we have agreed to.*** Therefore, it is very important that you find out exactly what mental health services your insurance policy covers.

You should carefully read the section in your insurance coverage booklet that describes mental health services. If you have questions, you should call your plan administrator and inquire. Of course, I will provide you with whatever information I can based on my experience and will be happy to try to assist you in deciphering the information you receive from your carrier.

The escalation of the cost of health care has resulted in an increasing level of complexity about insurance benefits that sometimes makes it difficult to determine exactly how much mental health coverage is available. Insurance companies may base your coverage upon a clinical diagnosis, plan type, service received (such as individual vs. couples therapy), or other restriction. Thus, if you are planning to submit your receipts for insurance reimbursement, it may be helpful for you to call your plan administrator and ask about the specific terms of coverage.

*Please note:* I do not participate on the panels of “Managed Health Care Plans” such as HMOs and PPOs. Thus, if you have one of these particular types of plans and you wish to see me for psychotherapy, it is very important for you to find out the availability of coverage for an “out-of-network psychologist.” If we are able to work together under one of these plans, your insurance company may require advance authorization before they will provide reimbursement for mental health services. These plans often require a short-term treatment approach designed to resolve specific problems that are interfering with one’s usual level of functioning. In my experience, while quite a lot can be accomplished in short-term therapy, many patients feel that more services are necessary after insurance benefits expire.

You should also be aware that most insurance agreements require you to authorize me to provide a clinical diagnosis, and sometimes additional clinical information such as a treatment plan or summary, or in rare cases, a copy of the entire record. *This information will become part of the insurance company files*, and, in all probability, some of it will be made part of an electronic data bank. All insurance companies claim to keep such information confidential, but once it is in their hands, I have no control over what they do with it. In some cases they may share the information with a national medical information data bank. If you request it, I will provide you with a copy of any report I submit.

Once we have all of the information about your insurance coverage, we will discuss what we can expect to accomplish with the benefits that are available and what will happen if the insurance benefits run out before you feel ready to end our sessions. It is important to remember that you always have the right to pay for my service yourself and avoid the complexities described above.

*If you plan on seeking insurance reimbursement, please note the following process I follow:*

Regarding payment, you will pay for each session yourself following policies and procedures in the “Professional Fees” and “Billing and Payments” sections of this document. I do not bill third-parties, like insurance companies, directly. It will be your responsibility to request a reimbursement from your insurance company. Once I receive your payment, I will provide you with a statement detailing the charges. You will then submit the statement to your insurance company along with a properly filled-out claim form. It is important to remember that I have no control over your insurance company’s policies and reimbursement



procedures. However, I will assist you to the best of my ability in this process.

### LATE CANCELLATIONS AND MISSED APPOINTMENTS

Once an appointment hour is scheduled, you will be expected to pay for it unless you provide at least 24 hours advance notice of cancellation (unless another arrangement has been made). Cancellations should be made by telephone or email (text messages cancellations will not be accepted). *Please do not consider an appointment canceled until you have heard a confirmation from me.*

The charge for a missed appointment or late cancellation is not a charge for a service that was provided, but rather is a charge for a missed business opportunity. Your appointment time is specially set aside for you. If you cancel within 24 hours, I have a chance to fill your time slot to see another patient that day and not lose the income I was counting on. Thus, a missed appointment or late cancellation is not reimbursable by third-party payers such as insurance companies. If you miss an appointment or cancel an appointment with less than a 24-hour notice, you will be charged directly regardless of previous billing arrangements.

The fee for a missed appointment or appointment canceled with less than a 24-hour notice is 80% of the full fee rate (or \$180). This fee is due and payable within 30 days of the missed or canceled appointment.

**FEE INCREASES:** Fee increases are scheduled to take place each year. A fee increase may be up to a maximum of 10% of the total fee paid (generally \$5-\$15 per session). Patients will be given a 60-day notice before any fee increases are made.

### CONTACTING ME

*Telephone:* If I am not available, I will have your call forwarded to a confidential voicemail system that I monitor frequently. Please note that it is always important to leave your area code and telephone number as sometimes I may get your message when I am out of the office and I may not have your phone number immediately available. Non-urgent messages are returned during normal workdays (Monday through Friday) within 24 hours. Weekend and holiday calls or emails will be returned on the next working day. If you are difficult to reach, please leave some times when you will be available. If I am unavailable for an extended time, I will provide you with the name of a trusted colleague whom you may contact if necessary.

*Electronic Communications:* Due to the complex nature of electronic communication, I have created a separate document that explains how to communicate with me electronically. This document is called my “Electronic Communications Policy” and will be reviewed with you separately. If you have any questions about this policy, please feel free to discuss them with me.

*Postal Mail:* If you wish to contact me by postal mail, it is recommended that you use my mailing address: 9171 Wilshire Blvd., Penthouse Suite, Beverly Hills, CA 90210.

#### *Urgent Matters:*

If you cannot wait for a return phone call, and you believe you are having a psychiatric emergency, follow the emergency procedure listed below:

#### ***In Case of Emergency:***

**If you are dealing with a life threatening or other type of psychiatric emergency, you should first call 911 or go to the emergency room at the nearest hospital and ask for the psychologist or psychiatrist on-call. Then, after you have secured emergency services, you (or someone you designate) may contact me and alert me of the situation.**



## PROFESSIONAL RECORDS

Both law and the standards of my profession require that I keep treatment records. You are entitled to receive a copy of the records, but if you wish, I can prepare an appropriate summary. Because these are professional records, they can be misinterpreted and/or can be upsetting to lay readers. If you wish to see your records, I recommend that you review them in my presence so that we can discuss the contents. I will also be happy to forward the summary to another appropriate mental health professional that is working with you.

Patients will be charged an appropriate fee for any preparation time required to comply with an information request.

## CONFIDENTIALITY

In general, law protects the confidentiality of all communications between a patient and a psychologist, and I can only release information about our work to others with your written permission. However, there are a number of legally defined exceptions. There are some situations in which I am legally required to take action to protect others from harm, even though that requires revealing some information about a patient's treatment.

I will have to release confidential information about you and/or your treatment in the following circumstances listed below. These situations have rarely arisen in my practice. Should such a situation occur, I make every effort to fully discuss it with you before taking any action.

(1) If I have a reasonable suspicion that a child, an elderly person, or a dependent person is being abused, I am required by law to file a report with the appropriate state agency. With regard to suspected child abuse, be aware that in addition to instances of physical abuse, emotional abuse, or neglect, child abuse law in California now mandates psychologists to report to appropriate authorities any instance where you disclose that you have accessed, streamed, or downloaded material in which a child is engaged in an obscene sexual act.

(2) If I believe that a patient is threatening serious bodily harm to another person or people, I am required by law to take protective actions, which may include notifying a potential victim or victims, notifying the police, or seeking appropriate hospitalization.

(3) If a patient threatens to harm him/herself, I may be required to seek hospitalization for the patient, or to contact family members or others who can help provide protection.

I may occasionally find it helpful to consult about a case with other professionals. In these consultations, I make every effort to avoid revealing the identity of my patient. The consultant is, of course, also legally bound to keep the information confidential. Unless you object, I will not tell you about these consultations unless I feel that it is important to our work together.

While this written summary of exceptions to confidentiality should prove helpful in informing you about potential problems, it is important that we discuss any questions you may have at our next meeting. The laws governing these issues are quite complex and I am not an attorney. While I am happy to discuss these issues with you, should you need specific advice, you may want to consult with your own attorney.

## TERMINATION OF THERAPY

The length of your treatment and the timing of the eventual termination of your treatment depend on the specifics of your treatment plan and the progress you achieve. It is a good idea to plan for your termination in



collaboration with me. I will discuss a plan for termination with you as you approach the completion of your treatment goals.

You may discontinue therapy at any time. If you or I determine that you are not benefitting from treatment, either of us may elect to initiate a discussion of your treatment alternatives. Treatment alternatives include, among other possibilities, referral to another provider of agency, changing your treatment plan, or terminating your therapy.

### FINAL WORDS

Psychotherapy creates a unique and personal relationship between a therapist and a patient. The California Department of Consumer Affairs mandates that all therapists provide every new patient with access to the brochure: “Professional Therapy Never Includes Sex.” This document can be viewed and printed for free at the following web address:

<http://www.dca.ca.gov/publications/proftherapy.shtml>

Although Los Angeles is a large city, the community in which we live sometimes seems small. There may be times when we run into each other outside of the therapy office. Sometimes these are awkward situations and sometimes they are not. If we do see each other, I will follow your lead as to whether I say “hello” or not. Please know that I will not reveal the fact that you are a patient. You, however, are free to reveal (or not reveal) any information you wish.

Miscommunication between provider and patient is one of the primary reasons for dissatisfaction in healthcare relationships. Please make notes and clarify any questions you have about this document or any other aspects of treatment with me during our next session, or if you would like, by telephone before our next session. Unless determined otherwise, the information in this document will describe our professional relationship.

You are welcome to discuss the terms of this document at any time. You also may request an updated version (if available) at any time or by viewing it in the patient forms area of my website, [drdoorly.com](http://www.drdoorly.com). Again, welcome to my practice and I look forward to our work together.

