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Bilingual Licensed Marriage & Family Therapist

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Welcome to my physical <u>and online</u> practice! I'm obsessed with the best possible client/customer experience. ¡Bienvenido! Este documento está disponible también en español, si prefiere. I feel honored that you are seeking my support to help you:

- -improve your relationships
- -release the emotional charge of past disturbing memories
- -capitalize your strengths, abilities and resources
- -create and explore possibilities for positive changes in your life and stick long-term

Most of my clients start seeing results within 1 to 6 sessions with me, contrary to the popular belief that "things get worse before they get better." This is your copy about my policies provided to help you make an informed decision about counseling with me. Feel free to discuss concerns you may have after reviewing this information. It may be comforting to know I also provide consultation for EMDR therapists as an EMDRIA-approved consultant and I train as accredited facilitator in EMDR trainings.

I have a **diversity-friendly** and **pro-relationship** stance. I work with people of all backgrounds, including undocumented immigrants, the Spanish-speaking community, and people who identify as LGBTQQIAA+. I place high value on relationships. I publish and present internationally. I'm also one of few people in San Diego with a doctorate of Marriage and Family Therapy from a COAMFTE-accredited program, the highest level of MFT accreditation in the nation. Click here for more info about me.

Fees for my services:

I prefer to refer to fees as investments in your emotional wellbeing (after all, what's more important than your emotional well-being, mental health and your relationships?). Also, with fees, it's vital to consider length of treatment, i.e. 6 weeks vs. a year. While there's no guarantee, my clients do tend to improve quickly; therapy is not meant to be long-term in most cases. And there's a benefit: you can often claim therapy as an expense on your tax return. If you aren't paying with cash/card, I also accept PayPal, Venmo, checks, direct bank transfer, or Square Cash.

On January 1, 2022, health providers are required to provide clients with a "Good Faith Estimate" (GFA) of the approximate cost of all services rendered geared to meet your treatment goals. This is an estimate subject to change, given how therapy progresses. This will be provided for you upon request within 3 business days for no charge. **Initials:** The standard fees for **individual** sessions: The initial 80-90 minute session is \$445, 30 minute session is \$145, 45-50 minute session is \$220, 60 minute session is \$245, 75 minute session is \$305, 90 minute session is \$365, 105 minute session is \$415, 120 minute session is \$485, 180 minutes is \$705. Initials:____ The standard fee for **couple/family** sessions [because they can require more time/energy]: The standard fee for couple/family sessions [because they can require more time/energy]: Initial 80-90 minute session is \$495, 30-minute is \$165, 50-minute session is \$265, 60-minute session is \$285, 75-minute session is \$345, 90-minute session is \$415, 105-minute session is \$485, 120minute session is \$545, 180-minutes is \$775. **Initials:** If this is too expensive, several options may be available: you can work with one of my associates, Shanelle Collins, AMFT (858-255-1447), or Bridget KerMorris, AMFT (858-598-4716) for \$135-165 (\$165 is the norm and you'd agree on it prior with your therapist) per 50minute session. If you choose this option, I would be supporting her with your case. Other options: fewer sessions per month, shorter sessions, or referral to a colleague. If you have documentation that your income is substantially low (usually less than \$2-4k monthly, especially if you have kids), I may be able to reduce the fee [depending on sliding scale availability in my practice at the time (NO guarantee)] because I want my services to be accessible. At this point in time, seeing Sarah instead of me would usually be the better option. If we do agree on a reduced fee starting at \$145, it would need to be requested and accepted beforehand for individuals (\$285 still for the initial assessment and \$315 for couples/families), it will be adjusted when your finances improve. **Initials:** If you owe a balance, an **interest rate** of \$5/day applies unless we arrange something else. Initials: I bill in 10-minute increments, so if we go over time in a session, which often lasts 60-minutes, when we both have the flexibility to do so, you will be billed extra, pro-rated. For example, 10-15 minutes over would be 20% of a 60-minute, individual therapy session, meaning you'd pay \$300 (\$55 more) instead of \$245. Initials:

Fees are periodically changed and reviewed. Usually there is a 2 to 10% yearly increase [mostly in January] based on the economy's inflation rate (along with most businesses). There may also be fee adjustments outside of the yearly expected one. You will usually be notified one month prior to any fee increases via email. You get a \$5 discount if you do not pay with a card, which is what my credit card processor, Square, charges in commission. Sessions starting after 5pm are \$45, \$25 more if they go past 5pm; Sessions on weekends OR holidays are \$65 more. I charge a

If you are paying a discounted rate (if your income is low), you would be expected to pay via Zelle, cash or Venmo, otherwise you would be charged a \$5-10 fee to cover the fee from the

credit card processor. **Initials:**

flat fee of \$295 hourly if I am subpoenaed into court from your therapy and any additional courtrelated obligations. I also charge the standard fee (pro-rated based on time spent) if I do case management for you, such as collaborate with your previous therapist or psychiatrist. <u>Payment is</u> due at the beginning of service. <u>Initials:</u>

In the rare case that I spend time reviewing your paperwork but you never schedule a session, you may be charged a \$25-55 convenience fee to cover the time, prorated. **Initials:**_____

If you need a <u>letter</u> done or require my time "on rush," I may charge up to 1.5 times the standard fee (1-2 day rush), double (within 6 hours rush), or triple (within 3 hours rush). **Initials:**_____

If someone else is paying for your therapy, I would recommend clarifying what changes in you they would expect from therapy, and checking in with that periodically as treatment progresses. I also recommend, in most cases that the payer be cautioned not to expect a lot of change in you at first (even though we would expect and hope for a lot of change as soon as possible separately). This could also be a conversation with me and them [including you would be recommended but optional]. Initials:

I strongly value customer service and feedback. If you're unhappy with a charge on your card, I would kindly request that you try to address it with me before you consider disputing it with your bank (my card processing company, Stripe charges \$35 for all disputes, which can be avoided between us): I will likely help you quicker and better than the bank in most cases; sometimes with a full or partial refund. **Initials:**

There's a \$30 fee for bounced checks. If you find yourself unable to pay for therapy, let me know so we can consider options available to you at that time. If you come to session <u>intoxicated</u>, I wouldn't be able to see you, but you'd still be responsible for the fee. If you need me to *write a letter* about your therapy, I charge the standard fees outlined above, based on time spent, prorated. **Initials:**

In the rare case that you have an unpaid balance for over a month and do not respond to calls or written correspondence, I may, as stated, use collection agency for payment. **Initials:**

On January 1, 2022, health providers are required to provide clients with a "Good Faith Estimate" (GFA) of the approximate cost of all services rendered geared to met your treatment goals. This is an estimate subject to change, given how therapy progresses. This will be provided for you upon request within 3 business days for no charge.

Initials:

You may be wondering why I don't accept insurance. Many health insurance plans pay for a certain number of mental health visits, but they may only pay for services provided by in-network providers. I am an out-of-network provider for all insurance carriers. I will not bill your insurance for you, but will provide a super-bill at the end of each session for you to send to your insurance company for reimbursement. This is only for PPO plans with out-of-network benefits. PPO plans usually will reimburse somewhere between 40-80% after your deductible. Before making an appointment, please check your mental health out-of-network benefits first to find out if you will receive reimbursement, how much you will receive, and how to submit the receipts we give you. Be ware though that most insurance companies do not reimburse for missed sessions. I choose to remain out-of-network for 3 primary reasons:

1. When billing insurance, therapists are required to give a mental disorder diagnosis. Many

clients do not have mental disorders and are only in need of support or talking to a professional. Insurance will only pay for those with a diagnosis. This may stigmatize clients and potentially impact future opportunities.

- 2. Because insurance is footing the bill, they get to decide when therapy is over, based on therapist progress reports. However, client progress does not necessarily indicate that therapy should end. This decision should be left up to you and me.
- 3. Client confidentiality is compromised, as anywhere from 1-10 insurance workers are given access to client information in order to process the claim.

Other reasons why I don't currently accept insurance:

- Insurance companies set a "customary fee" based on the average therapists charge in a zip code. This is often less than the rate of doctoral-level clinicians and EMDR certification as therapist, consultant, and EMDR training facilitator.
- It is a time-consuming hassle.
- Each insurance plan pays a different amount for services, with a different deductible.
- It is often difficult to figure out what they pay for what service.
- Sometimes insurance companies have hidden clauses, are unclear in what they say, or there may be honest mistakes in communication.
- Sometimes there is a post-treatment review and a "claw back" of payments made if the company disagrees with the treatment or how it was billed.
- They will sometimes deny payment for reasons that are difficult to predict.
- Expectations set by insurance companies may be unrealistic. For example, when an insurance company tells a client "we only cover this condition for 12 sessions" it may give the impression that the condition "should be fixed" in 12 sessions, which is currently not always the case.
- When the insurance company limits the number of sessions, the therapist may still be required to continue to see the client at the rates set by the company.
- Some insurance policies require therapists to submit treatment plans or progress notes before they will authorize or pay for services. This is time consuming, and the review is often made by a clinician with less experience than myself (which is often why they work for insurance companies instead of in private practice). I do not submit treatment plans nor progress reports to insurance companies, primarily to protect your privacy.

My appointment scheduling and cancellation policies:

Attendance is essential for a successful outcome. The time I have for seeing patients is valuable and limited. Therefore, to cancel or reschedule, I expect you to notify (a text works as a back-up, but using your client portal is ideal: there's an app for it and a desktop easy log-on to cancel or reschedule) me within at least 72 hours (preferably 96 hours) before your appointment (3 business days—notify me a Thursday prior for a future Monday cancellation). Failure to do so means that you'll be responsible for full payment of the missed session. If you cancel within 72-hours, you'll be responsible for the fee, unless another client fills the slot [we'll clear it for you for other clients ASAP to help us try to avoid charging you a late-fee if possible!]. This also applies to rescheduled appointments, if you get sick or are called in court suddenly (among other uncontrollable chance situations), but **not** if you or a loved one is in a life-threatening emergency. <mark>In this</mark> case, the appropriate documentation (i.e. a hospital note) is usually required. Fortunately we can meet online or by phone if you can't come in person last-minute. If you need more flexibility, let me know and we can discuss. In the rarer case that we schedule an appointment within 12 hours before it would occur, and you then cancel hours before, you will still be responsible for the fee. Repetitive last minute cancellations, even with appropriate notice, may incur the full

session fee as well. I try to hold myself accountable to the same for you. Lastly, I schedule clients on a first-come-first-served basis, so scheduling appointments ahead of time is the best way to ensure you'll have a slot at your desired time, day, and week. Initials:_____
You might like to know about why therapists often charge a cancellation fee. For some of us, this is about covering costs of office rent, possible travel, turning away other clients to reserve session times. Some doctors, tutors, and hairdressers may charge cancellation fees to cover these costs too. It often depends on whether they are self-employed although sometimes groups and companies may charge an administrative fee for late cancellation. I mention this because I want to be clear that the fee for late cancellation is not a punishment. I see it more as an indication of the commitment and continuity of therapy. Even when you are not here, your space is being held and our work continues.

I or my assistant Alex also usually only use text messages for scheduling, not content of your therapy to protect your confidentiality. I or Alex usually answer within 30 minutes to 24-hours during business hours: 9 AM - 6 PM. If you come to session intoxicated, I wouldn't be able to see you, but you'd still be responsible for the fee. Even though my system sends reminders for your appointments; you're responsible for remembering if they don't go through. Initials:

As mentioned, I bill in 10-minute increments, so if we go over time for a 60-minute session,
when we both have the flexibility to, you'll be billed extra pro-rated. For example, 10 minute
extra would be 18% of a 60-minute session, so you'd pay \$235 (\$35 more) instead of \$200.
Initials:

Lastly, if you would like to end therapy prematurely, I usually deem it to be in your best interest if we have a closing session. That said, if you prefer not to pay for it, I'm happy to offer you a 20-30 minute closing session free of charge. **Initials:**

My availability:

Even though phone calls between therapy session are welcome, I attempt to keep these contacts brief [when I'm available] because important issues are usually better addressed within regularly scheduled sessions. A call, text or email exchange lasting longer than 5 minutes will be billed at the standard rate pro-rated. You can always leave a message at my confidential voicemail at 619-356-1847. I cannot promise to be available at all times as I don't take calls when I'm with clients or working, and reserve some time for myself. Non-emergency calls will most likely be returned Monday through Friday within 24 hours. *In an emergency, please call 911 or a 24-hour crisis line at* (888) 724-7240 (San Diego County). Lastly, if every now and then, you can't make it to session, occasionally phone sessions are possible (although not ideal). **Initials:**

Ready to work together?

Because you will be putting time, money, and energy into therapy, it's important to choose a therapist carefully. I strongly believe you should feel comfortable with the therapist you choose, and hopeful about the work ahead of you. Research shows that when you feel this way, you drastically increase the probability of therapy being helpful. Contact me if you would like information on the specific therapeutic orientations and techniques I was trained in and work from.

Central ideas in my work include:

I am currently trained in EFT (emotionally focused therapy: a couple and family therapy aimed at creating and deepening connection and improving relationships) and certified in EMDR (an individual therapy to geared toward processing past upsetting memories; feel free to ask for more info about this). I tend focus on emotional awareness, solution and resource building, rather then

dwelling on and extensively focusing on problems, as solutions are not always related to problems (which actually is supported by decades of research). I also view problems as 'between' people, in how you relate and interact with the important others in your life instead of 'inside' you. This is why I love family and couple work, and may invite your best friend or mother to come to your therapy at times.

Debunking the normal vs. pathology dichotomy: challenging and difficult times in our lives are not 'bad' but inevitable, affording us opportunities to learn, grow and understand ourselves. If we get "stuck" viewing them as "problems," it is very likely that we will repeat those difficult times over and over again and feel like a failure for doing so. We all do what we do for a purpose. Also our struggles often bestow expected gifts. Many people's talents stem from their deepest changes. For this reason, I like to focus on how adversity can be as gift in disguise. The goal is to validate your challenges, explore how they can become assets and help you find solutions and possibilities to the ones that you are facing *today*. For me, it's often about what's happening in the present moment and aiming for a more desired future, as opposed to what happened in the past. (I don't do psychoanalysis and I'm not here to "analyze" you).

Therapy is not like visiting a medical doctor. It requires your courage and commitment. I will ask you many questions such as "what do you want for you," "what is important to you," "what do certain experiences mean to you," "what strong feelings are involved," and "what choices you do want to make?" Our work together requires your best efforts to modify or challenge maladaptive or self-sabotaging thoughts, beliefs, patterns, attitudes and behaviors. We will continuously look together at our progress and goals and change our plans if we think we need to. Initials:

"Therapy is what happens out of the office." I want you to be able to create steps toward success, eventually *without my support*. I encourage you tap into and be more aware of your resources, learn from the exceptions (the times when a problem I may assign you to read certain books or watch certain videos. You may have to work on relationships in your life and make long-term efforts to get the desired results. Change will sometimes be easy and quick, but sometimes it will be slow and frustrating. Although EMDR works very well and often fast, there are no instant, painless cures. I do, however, believe that small changes leads to big ones and that you can learn new ways of looking at your situation that can help you cope and excel. This may sound counterintuitive but some of life's greatest hardships often become the sources profound growth and strengths, abilities and talents.

Confidentiality:

All sessions are held strictly confidential unless you provide <u>written permission</u> to release information about your sessions. In couple or family therapy, this applies to all members involved. That said, there are a few exceptions:

- I am required by law to report suspected child, elder or dependent adult abuse, or when I have assessed a client to be a serious danger of physical violence to themselves or someone else.
- Parents of minor clients have a legal right to the treatment of their minor, who's under 18 years old. (However, treatment is most effective when the minor is assured of their confidentiality in therapy).
- Because I am currently trained in two empirically validated and effective psychotherapy models, Emotionally Focused Therapy (EFT) for relationships, and Eye Movement Reprocessing and Desensitization (EMDR), I may consult my mentors on your case. Your information will still remain confidential.

- If the person who is paying for treatment is different than the person receiving treatment, we may have to be in touch with the payer. We would keep these communications briefly, only focused on billing and not therapy. **Initials:**_____

Your rights as a client:

- -Decide when to end therapy at any time. If you'd like, I can provide you with the contact information of other qualified therapists
- -Learn about other methods of treatment
- -Refuse any therapeutic technique (I'll inform you if I intend to use any unusual procedures and explain the risks)
- -File a complaint with the BBS (Board of Behavioral Sciences) if you view my conduct to be unethical/unprofessional **Initials:**_____

Benefits and risks of therapy:

Both are worth considering while making any decisions regarding your sessions. Anxiety, sadness, guilt, pain, anger, frustration, loneliness, helplessness or any other negative feelings tend to surface during therapy. Some people view therapy clients as weak, 'disturbed' or possibly dangerous. Therapy may trigger problems with important family members, or secrets may emerge. You may learn that some of your closest relationships are damaging to you. You may be encouraged to be more proactive, communicative, and assertive in your primary relationships and they may not like this. Also, difficulties *may* (despite what I say above) get worse before they get better and there's a risk that therapy may not work for you. There's also the possibility that you don't like something I say or do. My hope is that if and when this happens, we can talk about it productively, as it's likely to have occurred in other relationships. Healing ruptures is part of all healthy relationships. I always strive to create a culture of feedback in therapy. Initials:

Keeping in mind these risks, the benefits of therapy have been demonstrated by countless well-designed research studies. In therapy, you may notice that you feel better as you'll have a space to discuss things until feelings are alleviated and problems are solved. You may learn many coping skills or improve or tap into the ones you already have. You may seem more satisfied in your relationships and see your personal goals and values more clearly. I always enter into any therapeutic relationship with optimism about your progress although there's never a guarantee. Decades of psychotherapy research suggest that the most effective therapists are usually only effective with 7 or 8 of 10 cases. This means that if I don't see any progress within 6 sessions, I may refer you to another qualified therapist or that we'll have an important discussion about therapy and if it's helping. As an ethical professional, I cannot continue to work with you if it's not helping you. I do often use two written brief scales to gauge progress and make sure we're on the right track. Initials:

Boundaries:

I strive to provide a professional service. However, the therapeutic relationship tends to become quite intimate, unlike any other relationship. <u>I strive to avoid multiple relationships (when I would play another role in your life besides your therapist)</u>. This is because research shows that these relationships risk contaminating the therapy and potentially exploiting or harming to you, your progress or our relationship. Consequently, in order to give you the best service, my judgment needs to be professional and unselfish at all times. This means that our relationship is limited to therapist-client only, even when therapy ends. <u>I cannot ethically be your friend (including on social media [you can follow me on platforms but I usually won't engage because it can jeopardize your confidentiality]</u>), employ you, accept valuable gifts, lend or borrow from you in exchange for therapy (except under certain, rare circumstances) **or engage in any kind of**

sexual or romantic relationship with you or anyone close to you. A professional therapist NEVER has sexual or romantic contact with clients. **Initials:**

In some cases, just because I agreed to 1-3 sessions being your therapist, this doesn't guarantee I will continue being your therapist long-term. If I deem clinically that I'm not the right fit for you, it wouldn't be ethical or in your best interest for me to continue seeing you. Thus, I would refer you to other services, programs, or therapists that I'd believe would be better for you. **Initials:**

Therefore, I may ignore you if I see you unexpectedly in a public place or decline your invitation to attend a family gathering (if you approach me, it's understood that our encounter will be brief and superficial). That is to say, my duty is to care for you only in the professional role as your therapist. I'm open to discuss any questions or concerns about this. Initials:

Technology:

Many clients use text messages or email and these methods of communication come with additional risks such as message failure, information not being received, and the possibility of misunderstandings with text-based communication due to the lack of nonverbal visual cues. I don't usually answer the phone and my virtual assistant usually only helps via text. I also may not check my email daily, which can result in a delayed response. Email (which is not encrypted) results in various servers creating permanent records of our exchanges, which makes confidentiality an issue, as third parties may have access to your communication. Therefore, I cannot fully guarantee confidentiality when communicating by email or cell phone, despite my persistence to do so. Keeping this in mind, you can make the choice to use these devices accordingly. Assessment is also more difficult without the benefit of face-to-face contact. Initials:

If we meet online, here is your **informed consent for telehealth services**. Prior to starting video-conferencing services, we discussed and agreed to the following:

- There are potential benefits and risks of video-conferencing (e.g. limits to patient confidentiality) that differ from in-person sessions.
- Confidentiality still applies for telehealth services, and nobody will record the session without the permission from the others person(s).
- We agree to use the video-conferencing platform selected for our virtual sessions, and I would explain how to use it if needed.
- It is important to be in a quiet, private space that is free of distractions (including cell phone or other devices) during the session.
- It is important to use a secure internet connection rather than public/free Wi-Fi.
- It is important to be on time. If you need to cancel or change your tele-appointment, you will notify me in advance by phone or email. The same cancelation policy applies
- We need a back-up plan (e.g., phone number where you can be reached) to restart the session or to reschedule it, in the event of technical problems.
- We need a safety plan that includes at least one emergency contact and the closest ER to your location, in the event of a crisis situation.
- If you are not an adult, we need the permission of your parent or legal guardian (and their contact information) for you to participate in tele-sessions.
- As your therapist, I may determine that due to certain circumstances, telehealth is no longer appropriate and that we should resume our sessions in-person.

Client name or initials: Signature (yours or your Legal Representative):

**Even if you prefer to pay another way, I require a card to keep on file so I can conveniently bill any services aside from in-person sessions, such as therapy phone calls, treatment letters, tele-therapy, or any unpaid services. The card is <u>always</u> stored confidentially and I do not have access to the numbers or codes. Research has also shown this to improve your commitment to therapy. This also helps me bill you in case of a late-cancel or missed session. I will not to charge you on it as long as you pay another way. I know that keeping your card on file requires trust. I promise to keep your payment information as confidential as all your clinical record, stored in my system confidentially. Thank you for understanding.

The credit card to remain on file is (please fill out even if you prefer another payment

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Please check the above box treatment ends, to ensure le		k in with you free of charge, months after