

Be Still Counseling, LLC Professional Disclosure, Consent to Treat with Ashley Lauderdale, LPC and Practice Operations.

The majority of this document is mandated by both South Carolina State law and Public Law 104-191; **it is provided for your protection. Be Still Counseling, LLC has worked hard to anticipate** in obstacles you may experience by coming into treatment, please call Ashley Lauderdale with any questions about the following document.

Contact information-Be Still Counseling is located at 1 Carriage Lane, building D Charleston, SC 29407. Our operating hours are from 830am-2pm Monday-Thursday. After hour request can be made but will not be used on a regular basis. Fridays are utilized for workshops at the office and make up sessions throughout the week. Be Still Counseling phone number is 843-367-3490 (voicemail is confidential). More information can be obtained on the website www.Bestillcounselingsc.com. Phone and email are checked one time a day and therapist and/or program manager (Susan Durand) will return all messages within 24 hours.

Personal qualifications-Ashley Lauderdale, MA LPC is a licensed therapist (5321) in the state of South Carolina. Ashley graduated from The University of Tennessee Summa Cum Laude in 2003, with a degree in Psychology. Ashley moved to Charleston and received a Master's in Counseling with a focus on Marriage and Family Counseling from Webster University in 2005. See website for more information on services offered.

Fees-

It is customary to pay for professional services at the time they are rendered. The hourly fee for individual therapy is \$125 per hour. The fee for couples and the initial intake is \$150 per 90 minutes. Be Still Counseling currently accepts Blue Cross Blue Shield insurance only. If you have the above insurance, you are responsible for to pay a co-pay for your therapy. I you do not whether your

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deductible has been met, you will be required to pay the full amount. We will refund your fee minus the co-pay if we find your deductible has been met. If you choose to not file insurance and pay cash, Be Still Counseling will offer you 20% off.

ConfidentialityThe information you share in psychotherapy is protected health information and is generally confidential by both South Carolina statute law and federal regulations.

Your therapy file can be subpoenaed in South Carolina through a court order (signed only by a judge) but is considered privileged in the federal court system. Ashley Lauderdale, MA LPC is mandated by Duty to Warn-to breach confidentiality if he/she discovers: 1) you are threatening self-harm or suicide, 2) you are threatening to harm another or homicide, 3) a child has been or is being abused or neglected, 4) a vulnerable adult has been or is being abused or neglected, 5) animals are being abused or neglected. Finally, if you wish your protected health information to be shared with another party, you must sign a Release of Information.

Ethic -Be Still Counseling, Ashley Lauderdale, MA LPC adheres to the following code of ethics

The South Carolina Board of Examiners for The Licensure of Professional Counselors, Marriage and Family Therapists, and Psycho-educational Specialists.

Therapist cannot have any type of relationship with clients outside the counseling setting, cannot accept gifts from clients, and any type of sexual contact is unethical.

Informed Consent-At the end of this document you will be asked to sign indicating that you have been given this document and the HIPAA document that follows. Your signature indicates that you have read and understand the documents and that you consent to treatment. Please be aware of the following:

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-Ashley Lauderdale, MA LPC is not a doctor and as a result cannot prescribed medication

-Getting treatment at Be Still Counseling does not guarantee results. All mental health treatment is subjective with success meaning different things to different people.

-Ashley Lauderdale, MA LPC may ask to consult with your general physician, psychiatrist, lawyer, and/or previous counselor with permission.

-Ashley Lauderdale is not available after hours or on the weekends. In the case of emergencies that cannot wait until working hours mobile crisis 843-414-2350, 911 and/or an agreed safety plan will be implemented.

-Ashley Lauderdale, MA LPC values your time and in return expects the same. One late cancelation or no show will be allowed and after that all cancelations/no show made within 12 hours will be billed fully. To be on the safe side attempt to make all cancelations within 24 hours.

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Ashley Lauderdale, MA LPC is licensed through the SC Board of Examiners for The Licensure of Professional Counselors, Marriage and Family Therapists, and Psycho-educational Specialists; this board is located in The Synergy Center (Kingstree Building) in Columbia, South Carolina at 803-896-4652 (mailing address is P.O Box 11329, Columbia, SC 29211-1329).

The Executive Administrator for Be Still Counseling, LLC is Ashley Lauderdale, MA LPC. She is a confidential administrator under the state and federal law. She will be your contact for appointments concerns, and commendations.

Health Insurance Portability and Accountability Act of 1996 (HIPAA) This noticed describes how medical information about you may be used and disclosed and how you can get access to this information. Please review it carefully. This document

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may be updated without notice so please review it each time you visit us. A copy of this statement is always available upon request. All information revealed by you in a counseling or therapy session and most information placed in your counseling/therapy file (all medical records or other individually identifiable health information held or disclosed in any form [electronic, paper, or oral]) is considered “protected health information” by HIPAA. As such, your protected health information cannot be distributed to anyone else without your express informed and voluntary written consent or authorization.

The exceptions to this are defined immediately below. Additional information regarding your rights as a client can be found in your therapist’s/counselor’s Professional Disclosure Statement and Consent for Treatment. Use or disclosure of the following protected health information does not require your consent or authorization:

1. Uses and disclosures required by law - like files court ordered by a Judge
2. Uses and disclosures about victims of abuse, neglect, or domestic violence - like the Duties to Warn explained in your therapist’s/counselor’s Disclosure Statement
3. Uses and disclosures for health and oversight activities - like correcting records or correcting records already disclosed
4. Uses and disclosures for judicial and administrative proceedings - like a case where you are claiming malpractice or breach of ethics
5. Uses and disclosures for law enforcement purposes - like if you intend to harm someone else (see Duties to Warn in your therapist’s/counselor’s Disclosure Statement)
6. Uses and disclosures for research purposes - like using client information in research; always maintaining client confidentiality
7. Uses and disclosures to avert a serious threat to health or safety - like calling Probate Court for a commitment hearing
8. Uses and disclosures for Workman’s Compensation-like the basic information obtained in counseling as a result of your Workman’s Compensation claim.

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Your Rights as a Counseling/Therapy Client under HIPAA

- As a client, you have the right to see your counseling/therapy file. Psychotherapy notes are excluded from this right per HIPPA regulations.

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As a client, you have the right to receive a copy of your counseling/therapy file. This file copy will consist of only documents generated by us. You will be charged copying fees at \$.10/page. Psychotherapy notes are not included under the HIPPA regulations.

- As a client, you have the right to request amendments to your counseling file.

-As a client, you have the right to receive a history of all disclosures of protected health at \$.10/page.

- As a client, you have the right to restrict the use and disclosure of your HIPPA information for the purposed of treatment, payment, and operations. If you chose to release any personal information you will be required to sign a release of information.

-As a client, you have the right to register a complaint with the Secretary of Health and Human Services if you feel your rights, herein explained, have been violated. Prior to your counseling or therapy, you will receive 1.) your HIPPA notice and rights as a counseling/therapy client under HIPPA 2.) your therapist's/counselor's Professional Disclosure Statement and Consent for Treatment-both for your personal records. It will be necessary for you to sign a certificate indicating that you have read and understand both documents. This certificate will be placed in your counseling file. If you do not understand anything about the documents, please do not sign before asking questions.

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I have acknowledged that I have received and read the Be Still Counseling Services, LLC Professional Disclosure Statement and Consent for Treatment and HIPAA Client's Rights. I further acknowledged that I seek and consent to treatment with Ashley Lauderdale, MA LPC. My signature below confirms that I understand and accept all the information contained in the Be Still Counseling, LLC Professional Disclosure Statement, Consent for Treatment, and the HIPPA Client's Rights.

Client #1 Signature/Date

Client #2 Signature/Date