

Nancy Neptune, MA, LPC
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Houston, TX 77057
713-622-1922

Explanation of Counseling Services

Agreement

It is my intention to render my services in a professional manner consistent with accepted standards of practice. Our sessions will be 50 minutes in duration for individual counseling. At times, longer appointments may be scheduled with the agreement of all parties. These longer sessions may include hypnotherapy or Voice Dialogue sessions or when clients want longer sessions to complete a piece of work. At such time, it will be with client's agreement and the additional time will be charged at the same rate as the first 50 minutes.

In exchange for a fee of \$140 per 50 minutes, I agree to provide counseling service to you. The fee for each session will be due and must be paid at the conclusion of each session, unless prior arrangements have been made. Personal checks or cash are preferred, but credit cards are also accepted. Should you be unable to keep an appointment, you agree to notify me 24 hours in advance or pay the full fee for the session. You should note that insurance companies do not reimburse for missed appointments. The only time this fee will be waived is in the event of serious or contagious illness or emergency. Work commitments are not considered emergencies.

If I am on the in-network panel for your insurance company, I will file the claims directly. If I am in-network I have an agreement with your insurance company for the fee per session and you will be responsible for only the co-payment. If I am out of network with your insurance company, you will be responsible for paying the full fee at the time of service and I will provide you with statements so you can file for reimbursement directly.

Some health insurance companies reimburse clients for my counseling services and so do not. Many have a deductible clause and will reimburse only a percentage of my fee. You should contact your company representative to determine whether your insurance company will reimburse you. They would also be able to tell you what the schedule of reimbursement will be.

Health insurance companies always require that the counselor diagnose a mental health condition and indicate you have an "illness" before they will reimburse you. In that event, I will inform you of the diagnosis I plan to render before I submit it to the insurance company. Any diagnosis made will become a part of your permanent insurance record.

If you have any questions regarding any of this information please feel free to ask.

Education and Training

I have been licensed by the State Board of Examiners of Professional Counselors since 1990. My degrees include a B.S. in Psychology (1975) from the University of Houston

and a Master of Arts in Psychology from Houston Baptist University (1989).

Area of Competence

I work with individuals and couples. I work with clients who, I believe, have the capacity to resolve their own problems and make their own decisions with my assistance as a facilitator. My clients include individuals who experience difficulty resolving personal and interpersonal problems. Managing life's stressors is often a primary goal for clients.

Self-awareness, self-acceptance, and independence are my goals, and they sometimes take a long time to achieve. Some clients need only a few counseling sessions to achieve these goals, while others require months or even years of counseling. As a client, you maintain control of yourself and you may end our counseling relationship at any point. I will be supportive of your position. If you are dissatisfied with my work, I will refer you to another counselor with whom you might be able to work more effectively. If counseling is effective, you should feel a sense of progress.

Orientation

My counseling orientation is primarily cognitive behavior supplemented by humanistic and existential orientations. I prefer to work in the affective (emotions), cognitive (thoughts) and behavioral domains of a person as we explore different facets of a problem.

Confidentiality

I will keep confidential what you tell me, in accordance with Federal HIPPA Regulations, with the following exceptions: (1) you sign a written request for me to consult or talk with someone else and I agree to do so, (2) you are of imminent danger to yourself or to others, (3) I am ordered by a court to disclose information, (4) you disclose child abuse, (5) you disclose abuse of an elderly person, or (6) you disclose being sexually involved with a prior therapist.

Professional Relationship

It is important for you to understand that we have a professional relationship. Our contacts, other than chance meetings, will be limited to appointments you arrange with me. I cannot attend your social gatherings, accept gifts worth more than \$50 from you, or relate to you in any other way than in the professional context of our counseling sessions. You will be best served if our relationship remains professional and our sessions concentrate on your concerns.

The State Board of Examiners of Professional Counselors establishes the rules under which I provide services. The Board's Address and telephone number are as follows:

1100 West 49th Street
Austin, Texas 78756-32183
(512) 834-6658.