

CLIENT INFORMATION FORM

Welcome to Akron Family Institute. We look forward to working with you, and hope you will find the time you spend with us to be a positive experience. The following information will be helpful to you.

SERVICES PROVIDED

Your therapist will help to develop a treatment plan that will address your specific needs and problems. This plan will generally consist of a number of counseling sessions.

Your therapist may recommend that you participate in one or more of the following:

- Individual therapy
- Group therapy
- Couple or family therapy
- Referral to other professionals, such as a physician
- Participation in other therapy programs, seminars and support groups
- Psychological or personality assessments and other tests

OFFICE HOURS

The support staff is available at our offices Monday through Thursday from 9:00am until 5:00pm, and Friday from 9:00am until 4:00pm.

WAITING AREA

Our waiting room is open from 9:00am - 5:00pm Monday through Thursday, and 9:00am - 4:00pm on Fridays. Our waiting room is closed at 5:00pm Monday through Thursday and 4:00pm on Friday. If your appointment with your therapist is after the waiting room is closed, please wait in your car until your therapist is ready. When your therapist is ready, they will call you to meet them at the front door.

CONCEALED WEAPONS

Akron Family Institute prohibits the carrying of a firearm, deadly weapon, or dangerous ordnance anywhere on the premises per OHIO REVISED CODE 2911.21 AND 2923.126.

CONFIDENTIALITY

We at Akron Family Institute are HIPAA compliant and follow all HIPAA regulations. You will receive a copy of NOTICE OF PRIVACY PRACTICES – BRIEF VERSION with this intake information. The complete, long version is available at your request. The nature and content of discussions and sessions with any AFI therapist will be regarded as confidential. Your therapist and The Client's Rights form will explain the limits to confidentiality and issues regarding the sharing or release of information.

Supervisors have responsibility to approve and oversee the treatment process. As a result, supervisors will have access to all relevant information pertaining to each case.

APPOINTMENTS

Your therapist or support staff can schedule appointments. Since schedules tend to be very full, you may want to schedule several appointments in advance. If you must cancel, please do so at least twenty-four hours in advance so that your therapist can offer the time to another client. Because it is difficult to fill this time on short notice, **appointments canceled or missed with less than twenty-four hours notice will be charged to you at full fee and cannot be billed to your insurance company.** If you must cancel an appointment, even on short notice, we would appreciate a call to let us know you won't be here. We will try to notify you in advance if the therapist is unable to keep a scheduled appointment.

IN CASE OF EMERGENCY

Our telephone line is answered between the hours of 9:00am-12:00pm and 1:00pm-5:00pm Monday through Thursday and 9:00am-12:00pm and 1:00am-4:00pm on Fridays. During office hours, our support staff will answer the line. If there is an emergency outside of business hours, please call 911 or go to your nearest emergency room. You may also call the National Suicide and Crisis Line (dial 988), or utilize the Crisis Text Line (text HOME to 741741). Our therapists do not check messages on evenings or weekends.

FEE SCHEDULE

Your therapy session will be billed at the rate of \$150 per session. Payment is expected at the time of service, unless other arrangements are made with your therapist. If your therapist is under supervision, the billing will include the supervisor's name. AFI support staff will work with you to file your insurance claims, but it is up to you to determine what coverage your health insurance plan offers. Please present your insurance card to our support staff at your first visit and any visits following if your insurance information has changed. Your insurance company will be billed once each month. You will also receive a monthly statement to monitor payments. Please remember that the final responsibility for payment rests with you and that you must make provisions to pay for any services not covered by your insurance company.