MICHELE BOGRAD, Ph.D.

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INFORMATION ABOUT MY PRACTICE POLICIES

Welcome to my practice. This document contains important information about my professional services and business policies. Please read this information and raise any questions or concerns you might have with me. When you sign this document, it will represent an agreement between us.

As of 2023, I provide only short-term or episodic psychotherapy and consultation through Zoom (teletherapy).

Psychotherapy and Psychological Services:

Psychotherapy is not easily described in general statements. Therapy varies depending on the personalities of the psychological and the client(s) and on your particular concerns. Therapy may take a few sessions for a circumscribed problem and much more time for more complex circumstances and different goals. Our initial meeting(s) will involve our mutual exploration of your needs. We will both be assessing whether I can be of benefit to you. I only accept clients with whom I believe I can be helpful. If this is not the case or if you have questions about the benefit or comfort of working with me, I will refer to you others who have a different skill set, style or fit with you. Our first few sessions involve an evaluation of your needs and I will be able to offer you first impressions of what our work will involve. We will stay in an ongoing conversation and negotiation throughout our work together of your goals, our treatment relationship, and your sense of progress. The benefits of psychotherapy can be significant, from reducing a source of feelings such as sadness, anxiety or fear to learning new and more productive coping mechanisms that lead to substantial life changes and enhanced well-being. Psychotherapy also has inherent risks such as uncomfortable feelings that may arise as you explore difficult emotional memories and experiences. Psychotherapy entails a large commitment of time, money and energy, so you should be careful about the therapist you select. I welcome any questions as we work together to create a productive therapeutic relationship.

Appointment Scheduling and Cancellations:

I provide psychotherapy to adults, couples, and families. I am not accepting clients for long term weekly psychotherapy. Instead, I see clients for short term psychotherapy (6-10 meetings) or intensive consultations (2-3 hour meetings at a time).

Scheduling: I am available for appointments from 8:00 am daily with several nights until 7:00 pm for appointments. However, there is often a wait list for my early morning and evening appointments. I also periodically see people on weekends, but these times are reserved for longer sessions ranging from 1 ½-3 hours each. Sessions are usually 50 minutes in length, although some clients schedule me for 1 ½ sessions (75 minutes) or longer. The decision about frequency for consultation or short-term psychotherapy is based upon therapeutic needs, goals, financial circumstances and a mutual agreement on what frequency best addresses your hopes and concerns.

Cancellations: Please cancel a session by phone or e-mail. You will always get a message from me confirming that I have received the cancellation. The cancellation or rescheduling of a session requires at **least 48 hours advance notice**. Missed appointments or cancellations with less than 48-hour notice are subject to full fee payments. Although we may be able to schedule another time that week, you are

financially responsible for the second meeting as well. If you anticipate that you might need to cancel a specific appointment but are unsure of whether you can provide me with 48-hour notice, please discuss this with me so that we might arrange an alternative cancellation policy for that session.

The exceptions to this policy are situations involving natural disasters such as major snowstorms or circumstances beyond your control such as a death in the family, serious illness or other emergencies or unforeseen events. I'd appreciate if you would anticipate other possible exceptions and discuss them with me beforehand to avoid any misunderstanding.

If you are late for a session, my ending time does not change (for example, if you are ten minutes late, 40 minutes remain of your time). Consistency is an important factor in making progress in therapy. If appointments are frequently cancelled or missed, we will discuss whether continuing therapy makes sense.

Therapeutic Modality:

I see clients only via a HIPAA protected telemedicine platform.

Fees, Sliding Fee Scale, Insurance, Billing and Flex Spending:

Fees. My hourly rate is \$ 275.00. I prefer to be paid at the beginning of each session unless other arrangements are made at the initiation of our work together. I accept E-checks, paper checks or money transfer services such as Zelle. Please note that I will charge you my bank's fees for any check returned to me because of insufficient funds. I raise my fee every 1-2 years January and will notify you at least one month ahead of my increase.

Reduced fee scale. I negotiate reduced fees on a case-by-case basis. I reserve a percentage of my practice for people on sliding fees. Because of this, a reduced fee is not always available. If you pay a reduced fee, it is subject to re-negotiation if your financial situation changes or when I raise my fee.

Other possible charges. There are no charges for incidental phone contact that is infrequent and less than 15 minutes in length. Scheduled or unscheduled telephone calls of a therapeutic nature, report or letter preparation and writing, and attendance at meetings will be prorated and billed at the agreed upon hourly rate.

Insurance. I ask that you pay me directly my full fee. At the end of every month, I will complete a fully itemized insurance form (a "superbill") for you to submit directly to your insurance which will reimburse you directly. Note: I am not part of any managed care insurance panels or HMO's and I have opted out as a Medicare provider. As a licensed psychologist, I accept insurance plans that have an Out-Of-Network (OON) or Points of Service (POS) component. Be sure to understand your annual insurance deductive.

Although I will be glad to help you understand what your insurance does and does not cover, it is essential that you contact your insurance company before you meet with me to be well informed about your coverage. Ask your insurance company: Do I have coverage for an out-of-network outpatient behavioral health provider? Do I have a yearly deductible that has to be met before my coverage begins? What percentage of the cost of a session is covered? Is that of the usual and customary fee or the therapist's full fee? How many sessions per year does my health insurance cover? Does my policy renew on a calendar or policy anniversary basis?

You should be aware that most insurance companies require the release of clinical information, including, but not limited to, dates of service, diagnoses, treatment plans, and outcome. Signing this document gives me permission to release to your insurance company the information needed to obtain payment for my services. You are responsible for paying any fees or portion of fees not covered by your insurance.

HSA or Flex spending. I will be glad to provide itemized statements to you.

Contacting Me:

By voicemail. My voicemail is 781-643-5451. I almost never answer the phone in person. I check my voicemail from 7:30 AM until 7:00 PM. I make an effort to return calls within 48 hours. If I have not responded during that time, please call again in case your voicemail did not go through. Always leave me phone numbers where I can reach you and please repeat the number clearly and slowly. Please leave me several times to best reach you.

By e-mail. I employ email *only* to arrange or modify appointments. If you do not receive a reply to your email within 24 hours, please call me at 781-643-5451. Never rely on email for urgent or sensitive communications.

Please do not email me content related to your therapy sessions, as email is neither completely secure nor confidential; information that is sent or received cannot have its privacy guaranteed. By employing email with me, you are acknowledging that you are aware of the risks to your privacy and indicating that you will take responsibility for any related consequences. Be aware that all emails are retained in the logs of our respective Internet service providers. While it is unlikely that someone will be looking at these logs, in theory they are available to be read by the system administrator(s) of the Internet service provider. Any emails I receive from you and any responses that I send to you become a part of your legal record.

By texting. I do not text with clients.

In Case of Emergency:

In emergencies, please leave a message on my voicemail and clearly state that it is urgent. Since it may be several hours before I pick up your message, go to the nearest emergency room, let me know you are there, and give my contact information to the clinician on call.

Confidentiality:

In general, the confidentiality of all communications between a licensed psychologist and a client is protected by law and I can release information about our work to others only with your written permission. However, there are a number of exceptions to this rule about which you should be informed. **These are detailed more fully in the link to my HIPPA policy.** The laws of confidentiality are complex and are not exhaustively treated in this overview. Therefore, if your individual circumstances dictate a need to understand these laws more fully, I suggest you consult with an attorney.

Professional consultations. It is a common and conscientious practice for therapists to consult with professional colleagues to enhance the clinical services they provide. In these consultations I make every effort to ensure your confidentiality by presenting material in such a way that will not reveal your identity. Consultants are also legally bound to maintain confidentiality. Such confidentiality also pertains to therapists who provide office coverage during my vacations. I am very willing to let you know when I have sought consultation and am glad to be open with you about the content of the consultation.

Collection of overdue account. The use of collection agencies or the court system would require that I disclose some information about my professional services. The information released in such a case would involve the client's name, dates and types of services rendered, amounts due and other relevant financial data.

Insurance reimbursement. You may be aware that insurance companies have the right to require a clinical diagnosis and occasionally a treatment plan or summary. In rare cases the company may require the entire record. This information thus becomes part of the insurance company records. If you are concerned about the policies of your insurance carrier, please check with them before authorizing me to complete their claim forms.

Situations involving potential harm to self or others. I am legally and ethically required to take action to protect you and ensure your safety. If you threaten harm to yourself and we are unable to make a reasonable contract for safety or if I deem you gravely disabled, I am required to take protective actions that may include hospitalization and/or contacting authorities, family members, or others who can help provide protection. I am also legally and ethically required to take action to protect specifically named others from threatened harm. I am required by law to take protective actions that may include notifying the potential victim(s), contacting the police or seeking hospitalization for the client. Additionally, if I believe that a minor, elderly person or dependent adult is being abused or neglected, I am legally obligated to take action to protect them from harm and must file a report with the appropriate state agency.

If any of the above situations occur, it will always be my intent to work with you to find agree upon solutions. I will attempt to discuss the situation with you, if possible, before taking action.

Legal proceedings. Although communications between a psychologist and a client are treated as confidential, there are times when a judge can order me to testify or to reveal information. Examples include child custody and adoption cases, court ordered evaluations, malpractice and disciplinary proceedings, and cases in which the client has raised the issue of her or his mental health as part of a legal defense. Unless you grant written permission, I will refuse to provide any information until required to do so by court order.

Contact out of the office. If we unexpectedly run into each other in public, I will protect your confidentiality by following your lead about the nature of communication or acknowledgment with which you are comfortable. I will not acknowledge you unless you acknowledge me first. If you choose to greet me, I will not introduce you to anyone who is with me. When clients and I know that we will be in a public setting together (such as at a conference), it is best to anticipate that encounter together and to come to a mutually comfortable and ethically appropriate agreement about how we will handle those circumstances.

Professional Records:

The laws and standards of my profession require that I keep treatment records. You have the right to know what has been written about you and a right to a copy of any material in a formal record or report. You are entitled to view your records unless I believe that seeing them would have a serious impact, in which case I can provide a summary of the records instead or ask to forward the material to an appropriate person you designate. In a case where we have ended our work, I might ask you first to come in to discuss the content of the material requested.

Social Media:

This document outlines my office policies related to use of Social Media so that you can understand how I conduct myself on the Internet as a mental health professional and how you can expect me to respond to various interactions that may occur between us on the Internet.

Friending. I do not accept friend or contact requests from current or former clients on any social networking site (such as Facebook, LinkedIn). I believe that adding clients as friends or contacts on these sites can compromise your confidentiality and our respective privacy. It may also blur the boundaries of our therapeutic relationship.

Twitter, blogging and similar sites. Currently, I do not have a twitter account. However, should I have an account on such a social media site, I have no expectation that you as a client will follow my account. However, if you use an easily recognizable name or 'handle' and I happen to notice that you've followed me there, we may discuss that and its potential impact on our working relationship. I will not follow you on similar social media. My primary concern is your privacy and the impact of electronic contact on our therapeutic relationship. My reasoning is that I believe casual viewing of

clients' online content outside of the therapy hour can create confusion in regard to whether it's being done as a part of your treatment or to satisfy my personal curiosity. In addition, viewing your online activities without your consent and without our explicit arrangement towards a specific purpose could potentially have a negative influence on our working relationship. If there are things from your online life that you wish to share with me, please bring them into our sessions where we can view and explore them together, during the therapy hour.

Contacting me through social networking sites. Please do not contact me through SMS (mobile phone text messaging) or messaging on Social Networking sites such as Twitter, Facebook, or LinkedIn. These sites are not secure and I may not read these messages in a timely fashion. Do not use Wall postings, @replies, or other means of engaging with me in public online sites if we have an already established client/therapist relationship. Engaging with me this way could compromise your confidentiality. It may also create the possibility that these exchanges become a part of your legal medical record and will need to be documented and archived in your chart.

Use of search engines. It is NOT a regular part of my practice to search for clients on Google or Facebook or other search engines. Extremely rare exceptions may be made during times of crisis. If I have a reason to suspect that you are in danger and you have not been in touch with me via our usual means (coming to appointments, phone, or email) there might be an instance in which using a search engine (to find you, find someone close to you, or to check on your recent status updates) becomes necessary as part of ensuring your welfare. These are highly unusual situations and if I ever resort to such means, I will fully document it and discuss it with you when we next meet.

Mental health provider search and/or rating sites. You may find my psychology practice on sites such as Yelp, Healthgrades, Yahoo Local, Bing, or similar sites that list businesses. Some of these sites include forums in which users rate their providers and add reviews. Many of these sites comb search engines for business listings and automatically add listings regardless of whether the business has added itself to the site. If you should find my listing on any of these sites, please know that my listing is NOT a request for a testimonial, rating, or endorsement from you as my client. The American Psychological Association's Ethics Code states under Principle 5.05 that it is unethical for psychologists to solicit testimonials: "Psychologists do not solicit testimonials from current therapy clients/patients or other persons who because of their particular circumstances are vulnerable to undue influence." Of course, you have a right to express yourself on any site you wish.

Location-based services. If you used location-based services on your mobile phone, you may wish to be aware of the privacy issues related to using these services. If you have GPS tracking enabled on your device, it is possible that others may surmise that you are a therapy client due to regular check-ins at my office on a weekly basis. Please be aware of this risk if you are intentionally "checking in" from my office or if you have a passive LBS app enabled on your phone.

In Closing:

An essential dimension of our therapeutic relationship is that we have an open and honest communication about all aspects of our work together. I understand that it often takes time for trust to develop in order to discuss certain concerns freely. I expect and welcome your feedback about what is useful and helpful and what you think might be changed for the better. You have the right to question any aspect of your experience with me and to obtain a consultation or second opinion at any time. The success of this process depends on it being a collaborative endeavor.

Thank you for taking the time to read this important information and for considering the issues raised in a thoughtful fashion. Please sign and return the following page to me indicating that you have read and understand this material.

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CLIENT SIGNATURE PAGE Office Practice Policies

Please sign, date, and return this page to me.

I acknowledge the receipt of information describing the professional psychology practice of Dr. Michele Bograd, Ph.D. I have read this material which includes specific information about the following topics: office hours, length of sessions, availability, emergency procedures, vacation coverage, cancellations, billing procedures and collection of fees, insurance reimbursement and HIPAA, confidentiality and its legal and professional exceptions, the use of social media, and other rights and expectations. I understand that this material offers an overview of information pertinent to my treatment but is not meant to be an exhaustive document and is not a substitute for legal consultation on specific matters summarized within.

Print Name	
Sign Name	Date
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