

The Ladipo Group: Psychotherapy for Our Community, LLC

HIPAA & Privacy Guidelines

The information you share with us is very personal. The Ladipo Group makes every reasonable effort to preserve your privacy. This notice describes the measures that we take to protect your privacy and defines your role in that process.

Clinical and Financial Records

All records, clinical and financial, are maintained within secured systems. All clinical information that you share with us is confidential to the extent allowed by law. You will have the opportunity, if you come to therapy, to review and sign the Consent to Treatment that defines the scope and limitations of confidentiality. If you wish for us to release information to another care provider, we will do so only with your explicit written consent. In addition, we will not respond to any inquiries about your care that you have not authorized.

The Ladipo Group recognizes that the risk exists that information may be disclosed inadvertently through financial transactions between client and the therapist. When billing information is communicated to third parties (e.g. insurance companies) there is a de facto disclosure of personal information.

The Ladipo Group is an out-of-network provider for all insurance companies. Many insurance companies have out-of-network benefits for their members. They may require that you meet a deductible before they pay for some or all of our therapy services. Other companies may pay for our services outright. The difference depends on each individual plan and individual insurance company. As the client you are responsible for the full session fee if your insurance company does not provide any out-of-network benefits.

To simplify the process of our clients using their out-of-network insurance benefits we have contracted with Professional Revenue Management (PRM). PRM collects your insurance information (identification number, insurance plan name, etc.) and contacts the insurance company directly on your behalf. PRM will learn of the out-of-network benefits that you are eligible for and distribute this information to you. *The only information that PRM has access to is your insurance information* so that they can advocate for you to use your benefits.

The Ladipo Group does not charge an additional fee to use the services of PRM. The service is provided at no charge to you.

If you want PRM to obtain your out-of-network benefit information from your insurance company, please complete the Client Registration Form on our website at www.TheLadipoGroup.com.

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If you do not want to use your out-of-network benefits and/or you do not want PRM to have access to your insurance information then you can opt-out of this option by checking this box and signing directly below.

- I do **NOT** wish to use the billing service, Professional Revenue Management. I understand that I will be solely responsible for the psychotherapy session rates that I will pay at each session.

Signature

Date

Mailing List

We believe that clients can be better informed consumers if they are aware of services, programs, and issues related to the psychotherapy practice. Therefore clients are included on the mailing list. The mailing list is used to disseminate general information about The Ladipo Group such as announcements, newsletters, new workshops, or services.

The Ladipo Group does not sell, rent, or otherwise share the mailing list with any other organization or individuals. The mailing list will not be used for direct solicitation of funds. Please indicate whether or not you want to be on the mailing list.

_____ I would like to be on this mailing list.

_____ Please do **NOT** include me on this mailing list.

Communications

It is your responsibility to notify us if the address, e-mail, or phone numbers that you provided at the time of your initial contact change, or if you wish to change your preferred mode of contact.

In addition, please know that should a medical or clinical emergency occur, we may need to be in touch with the person you designated as your emergency contact.

Client Rights

As a client of The Ladipo Group, you have the right to:

- Request restriction on uses and disclosures of your personal information for treatment, payment, and healthcare options as delineated in this notice;
- Ask us to communicate with you by your indicated preferred methods;
- Ask questions, request additional information about privacy, or report a concern about privacy;
- Receive and keep a copy of this Notice of Privacy upon request;

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- Be informed of any changes should revisions be made to these privacy practices.

By signing this notice, I/we acknowledge that:

- **I/We reviewed this policy and have had the opportunity to ask questions about it;**
- **It is my responsibility to keep my contact information current (e-mail, address, phone number, etc.);**
- **I may make changes to my authorization of contact mode by providing a directive in writing.**

Print Client Name

Client Signature

Date

Print Client Name

Client Signature

Date