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Disclosure Statement

The practice of licensed or registered persons in the field of psychotherapy is regulated by the Mental Health Licensing Section of the Division of Professions and Occupations. The Board of Licensed Professional Counselors can be reached at 1560 Broadway, Suite 1350, Denver, Colorado 80202, (303) 894-7800. You are entitled to receive information about the methods and techniques of therapy I use, duration of therapy (if known), fee structure. You may seek a second opinion from another therapist or terminate therapy at any time. Also, in a professional relationship, sexual intimacy is never appropriate and should be reported to the board that licenses, registers, or certifies the licensee, registrant or certificate holder.

Confidentiality & Public Health Concerns

Any information you (or the client) provide during therapy sessions is legally confidential in the case of licensed marriage and family therapists, social workers, professional counselors, and psychologists; licensed or certified addiction counselors; and registered psychotherapists, except as provided in § 12-245-220 and except for certain legal exceptions that will be identified by the licensee, registrant, or certificate holder should any such situation arise during therapy, like (a) if you sign a release of information for a specific individual or agency; (b) child or elder abuse; (c) you are an imminent danger to self or others; (d) subpoena of records in a criminal procedure; (e) I am required to report any suspected threat to locations such as churches, schools, theatres, workplaces, law enforcement or any threats to national security. Also, when I am concerned about a client's safety, it is my policy to request a welfare check through local law enforcement. In so doing, I may disclose to law enforcement officers information concerning my concerns. By signing this disclosure statement and agreeing to treatment with me, you consent to this practice, if it should become necessary.

I consent to the use of Telehealth Therapy Sessions, if deemed necessary for physical and mental health care. I understand that there are potential benefits and risks to using videoconferencing technology: including but not limited to interruptions, unauthorized access and technical difficulties. I also understand that I can return to in-person office visits at any time, if, in fact, there are no public health restrictions, i.e. during a pandemic, like COVID-19. I understand that Embrace Counseling, LLC has taken steps to reduce the risk of spreading the virus but I also understand that by meeting in-person that I/we are assuming the risk of exposure to the coronavirus or other public health risks. I agree that I will only keep my in-person appointments if I am symptom-free. I am willing, along with the therapist, during times of public health concerns to wear a mask while in the office environment and throughout the session.

Under Colorado law, C.R.S. 14-10-123.8, parents have the right to access mental health treatment information concerning their minor children, unless the court has restricted access to such information. If you request treatment information from me, I may provide you with a treatment summary, in compliance with Colorado law and HIPAA Standards. Written reports requested by insurance companies, lawyers, physicians, etc. will also be charged at my hourly rate, starting at \$80 per document. Additionally, I consult with a treatment team of supervisors and/or a medical backup. The purpose of consultation is to enhance my ability to help you (or your child), and to provide the best quality of care. These professionals are required to follow the same standards of confidentiality previously described.

Education/Training/Credentials

I have a Masters of Arts in Counseling from Covenant Theological Seminary. I have been trained and certified in Biblical, Pastoral counseling for more than 15 years while conducting pre-marriage counseling for couples while serving with Family Life ministry for many years. I have obtained certificates of training in CBT, DBT and in various creative therapy modalities such as Play Therapy (which includes Sand Play Therapy), Art Therapy and Drama Therapy. I am also training

to be certified in Emotionally Focused Therapy (EFT) and as a Mental Health Integrative Medicine Provider (CMHIMP). Embrace Counseling, LLC is maintained under my credentials as a Licensed Professional Counselor in Colorado.

Please note the regulatory requirements for Mental Health Professionals in Colorado: An Unlicensed Psychotherapist is a psychotherapist listed in the State's database and is authorized by law to practice psychotherapy in Colorado, but is not licensed by the state and is not required to satisfy any standardized educational or testing requirements to obtain a registration from the state. A Certified Addiction Counselor I (CAC I) must be a high school graduate or equivalent, complete required training hours and 1,000 hours of supervised experience. A Certified Addiction Counselor II (CAC II) must be a high school graduate or equivalent, complete the CAC I requirements, and obtain additional required training hours, 2,000 additional hours of supervised experience, and pass a national exam. A Certified Addiction Counselor III (CAC III) must have a bachelor's degree in behavioral health, complete CAC II requirements, and complete additional required training hours, 2,000 additional hours of supervised experience, and pass a national exam. A Licensed Addiction Counselor must have a clinical master's degree, meet the CAC III requirements, and pass a national exam. A Licensed Social Worker must hold a master's degree from a graduate school of social work and pass an examination in social work. A Licensed Clinical Social Worker must hold a master's or doctorate degree from a graduate school of social work, practiced as a social worker for at least two years, and pass an examination in social work. A Psychologist Candidate, a Marriage and Family Therapist Candidate, and a Licensed Professional Counselor Candidate must hold the necessary licensing degree and be in the process of completing the required supervision for licensure. A Licensed Marriage and Family Therapist must hold a master's or doctoral degree in marriage and family counseling, have at least two years post-master's or one year post-doctoral practice, and pass an exam in marriage and family therapy. A Licensed Professional Counselor must hold a master's or doctoral degree in professional counseling, have at least two years post-master's or one year postdoctoral practice, and pass an exam in professional counseling. A Licensed Psychologist must hold a doctorate degree in psychology, have one year of post-doctoral supervision, and pass an examination in psychology.

Theoretical Perspective

I serve my clients from an Experiential, Humanistic, Emotional and Cognitive perspective that integrates multiple counseling theories to best meet your needs. My counseling style is compassionately Person-Centered. My goal is to be in collaboration with you to understand your story, your environment and struggles. I may ask about others who are important in your life, cultural influences, and how you are impacted by societal pressures and oppressions. Together we will work to make positive changes in your life, working in a holistic manner that addresses any concerns of the mind, body, soul, as well as your social environment.

Services, Fees and Payment

I offer therapy services to both individuals and groups; which includes couples, children, teens and families. Embrace Counseling, LLC fees are charged at \$100 per session/hour. Couples sessions are \$130 and Family sessions are \$150. Standard sessions are 50-60 minutes long, while couples and families can be as long as 90 minutes. Sessions can be extended 30 minutes increments for an additional rate of \$25 each increment. Embrace Counseling, LLC can adjust fees on a sliding fee scale based on income, which will be determined at the first session. Embrace Counseling, LLC accepts various insurance types, including Employee Assistance Programs, otherwise payment is expected at the time of service, unless other arrangements are made, and may be made with cash, credit or debit cards, and health savings account cards.

Couple/Family Counseling

In providing a private therapy session to a spouse or family member that chooses to have a joint session with the other spouse or family members, I reserve the right to share information from the private session in the joint session if I feel it is necessary for effective treatment of the couple/family. Please note this scenario presents a different set of rules for the privilege of confidentiality than in individual counseling.

If you are involved in divorce and custody litigation, my role as a therapist is not to make recommendations to the court concerning custody or parenting issues. By signing this disclosure statement, you agree not to subpoena me to court for testimony or for disclosure of treatment information in such litigation; and you agree not to request that I write any reports to the court or to your attorney, making recommendations concerning custody. The court can appoint professionals, who have prior relationships with family members, to conduct an investigation or evaluation and to make

recommendations to the court concerning parental responsibilities or parenting time in the best interests of the family's children.

Text Message/Email/Emergencies

By signing this disclosure, you are allowing emails and text messages to coordinate scheduling and cancellation. Embrace Counseling, LLC can assure the confidentiality of emails and text messages. Therefore no confidential information will be sent via email or text message. Embrace Counseling, LLC will not release confidential information without a signed a "Release of Information" form.

I am available to return business calls between 9am and 7pm, Monday through Friday. I do not provide 24 hour emergency service. If you have an emergency please call your local 24 hour crisis line or call 911. There is no charge for brief client phone calls. Calls lasting longer than 10 minutes will be charged a pro-rated amount of my hourly fees.

Since I have reserved your appointment time exclusively for you, it is my policy to expect at least a 24 hour cancellation notice. No communication/no shows will be charged the full session fee of the appointment. I will negotiate exceptions for emergencies such as severe weather or sudden illness, to be determined on an individual basis.

There are both risks and benefits inherent in therapy. Please ask me about both of these in relation to your specific case. There may be psychological side effects from counseling. This risk comes with any therapy. You may share many painful experiences and my goal is to confront painful issues with gentleness and truth. There are no guarantees regarding the outcome of therapy, yet I hope our work together will benefit you.

Agreement and Acceptance:

I have read the preceding information, have had an opportunity to ask questions and understand my rights as a client or as the client's responsible party.

Print Client's Name

Date

Client or responsible Party's Signature

Relationship of Responsible Party

Print Client's Name

Date

Client or responsible Party's Signature

Relationship of Responsible Party

Therapist's Signature/Credentials

Date

Surprise/Balance Billing - Know Your Rights - Disclosure Form

Beginning January 1, 2020, Colorado state law protects you* from “surprise billing,” also known as “balance billing.” These protections apply when: (a) You receive covered emergency services, other than ambulance services, from an out-of-network provider in Colorado, and/or (b) You unintentionally receive covered services from an out-of-network provider at an in-network facility in Colorado.

What is surprise/balance billing, and when does it happen?

If you are seen by a health care provider or use services in a facility or agency that is not in your health insurance plan’s provider network, sometimes referred to as “out-of-network,” you may receive a bill for additional costs associated with that care. Out-of-network health care providers often bill you for the difference between what your insurer decides is the eligible charge and what the out-of-network provider bills as the total charge. This is called “surprise” or “balance” billing.

When you CANNOT be balance-billed:

Emergency Services - If you are receiving emergency services, the most you can be billed for is your plan’s in-network cost-sharing amounts, which are copayments, deductibles, and/or coinsurance. You cannot be balance-billed for any other amount. This includes both the emergency facility where you receive emergency services and any providers that see you for emergency care.

Nonemergency Services at an In-Network or Out-of-Network Health Care Provider - The health care provider must tell you if you are at an out-of-network location or at an in-network location that is using out-of-network providers. They must also tell you what types of services that you will be using may be provided by any out-of-network provider. **You have the right** to request that in-network providers perform all covered medical services. However, you may have to receive medical services from an out-of-network provider if an in-network provider is not available. In this case, the most you can be billed for **covered** services is your in-network cost-sharing amount, which are copayments, deductibles, and/or coinsurance. These providers cannot balance bill you for additional costs.

Additional Protections:

- (a) Your insurer will pay out-of-network providers and facilities directly.
- (b) Your insurer must count any amount you pay for emergency services or certain out-of-network services (described above) toward your in-network deductible and out-of-pocket limit.
- (c) Your provider, facility, hospital, or agency must refund any amount you overpay within sixty days of being notified.
- (d) No one, including a provider, hospital, or insurer can ask you to limit or give up these rights.

If you receive services from an out-of-network provider or facility or agency OTHER situation, you may still be balance billed, or you may be responsible for the entire bill. If you intentionally receive nonemergency services from an out-of-network provider or facility, you may also be balance billed.

If you want to file a complaint against your health care provider, you can submit an online complaint by visiting this website: https://www.colorado.gov/pacific/dora/DPO_File_Complaint. If you think you have received a bill for amounts other than your copayments, deductible, and/or coinsurance, please contact the billing department, or the Colorado Division of Insurance at 303-894-7490 or 1-800-930-3745.

*This law does NOT apply to ALL Colorado health plans. It only applies if you have a “CO-DOI” on your health insurance ID card. Please contact your health insurance plan at the number on your health insurance ID card or the Colorado Division of Insurance with questions.

Print Client’s Name(s)

Signature (clients or parents)

Date