

**Post and Associates**  
**Psychological Assessment · Consulting**  
www.postwyo.com

**Home Office**

1401 Airport Parkway  
Suite 120  
Cheyenne, WY 82001  
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Toll Free: 855.632.7771  
Phone: 307.632.7771  
Fax: 307.632.9697

**Branch Office**

1635 Foxtrail Drive  
Executive Office Suites  
Loveland, CO

Professional Services and Policies

Welcome to our practice! This document contains important information about our professional services and business policies. Please read the following information carefully, as well as the additional documents you have been provided with during your initial visit.

PSYCHOTHERAPY:

- Is the product of collaboration between you and your psychologist.
- Involves a variety of methods, such as talk therapy, play therapy, Eye Movement Desensitization Reprocessing (EMDR), etc.
- Requires your willingness to work through your concerns both during and outside of session times.
- May be a distressing or uncomfortable process at times, and is likely to bring up many difficult emotions for you.
- Often leads to greater coping strategies, better communication, and improved relationships.
- Involves a large commitment of your time, energy, and finances; therefore, you should carefully consider who you select as your psychologist, to ensure there is a "good fit" between the two of you.
- Is in high demand in our community; in order to meet the needs of our current and future clients in a professional manner, please note that we reserve the right to reschedule a session if you are more than 10 minutes late for your appointment, or notify you in writing if we will be closing your file due to noncompliance.
- Sessions are by appointment only. For routine non-emergency calls after hours, leave a message at (307)632-7771. In case of psychological emergencies after hours, go to the nearest hospital emergency room.

LIMITS OF CONFIDENTIALITY:

The law protects the privacy of all communications between a client and a psychologist. In most situations, we can only release information about your treatment to others if you sign a written authorization form that meets certain legal requirements. However, there are certain situations that supersede confidentiality, in which we are legally obligated to report our concerns to the appropriate agencies:

- If it has been disclosed or we have reason to suspect that a child, elderly individual, or disabled individual is being abused or neglected.
- If a client appears to be in imminent danger of harming his/herself or someone else.

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- In the event of certain types of court proceedings, we may be required to release limited information about your treatment.

PROFESSIONAL RECORDS

Please be aware that, pursuant to HIPAA (Health Insurance Portability & Accountability Act, see attached documents) we keep Protected Health Information (PHI) about you in a set of professional records which include:

- Your diagnosis
- Billing records
- Insurance information
- Treatment consent/intake forms
- Correspondence records
- Clinical case notes

You may examine and/or receive a copy of your records if you request it in writing and the request is signed by you and dated not more than 60 days from the date it is submitted. Please note that legal guardians of minor-aged youth have the right to examine and/or receive a copy of their children's records pursuant to Wyoming State Statutes under Titles 3 (Guardian and Ward) and 14 (Children).

INSURANCE REIMBURSEMENT

In order for us to set realistic treatment goals and priorities, it is important to evaluate the resources you have available to pay for your treatment. If you have a health insurance policy, it will typically provide some coverage for mental health treatment. We will file claims and provide you with whatever assistance we can in helping you receive the benefits to which you are entitled; however, you (not your insurance company) are responsible for full payment of fees. It is very important that you find out exactly which mental health services your insurance policy covers. Please note that we may be required to provide the following information to your insurance company:

- Clinical diagnosis codes and treatment modality codes
- Treatment plans or summaries of treatment
- A copy of your records as referenced above

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Please direct any questions or concerns regarding this information to the provider you meet with today. We look forward to your collaboration in meeting your mental health needs!