

VARHELY & ASSOCIATES PSYCHIATRIC SERVICES CONTRACT

Welcome to Varhely & Associates Psychiatry, and thank you for the opportunity to provide you with comprehensive, high quality psychiatric care. This document contains important information about our professional services and business policies. Please read it carefully and ask any questions that you might have at our first meeting, or beforehand by email. When you sign this document, it will be a binding contract between you and Varhely & Associates Psychiatry. You agree that we may update or revise the terms of this Agreement at any time. We will provide you with a copy of the current Agreement upon request without charge.

Intake Process:

Your initial visit will be a consultation to decide if our services match your current needs. In some cases, additional visits may be required to determine this. If we agree, after this consultation period to enter into a treatment relationship, then we will both have certain rights and obligations. You have the right to our professional time and expertise for your treatment. You have the right to be informed of the benefits and risks of treatment, and you may consent to or decline the treatment offered. Your obligations include cooperating with our decided plan of treatment, attending scheduled appointments, and paying the agreed upon fees on time.

Prior to scheduling your initial consultation, you must complete the New Patient Form available on this website. Please fill out this form as thoroughly as possible so that we can better understand the concerns that have brought you in for consultation. After you submit this form, we will review it and contact you to schedule your first appointment. If there are questions on the form that you do not wish to answer or are unable to answer, you may leave them blank.

What to bring to your initial appointment: Please assist us by providing the following information at the time of your initial consultation, if applicable:

- Current list of medications.
- **You must bring in prescription bottles before any controlled prescriptions will be issued (i.e. stimulants or benzodiazepines).**
- A copy of any laboratory results completed in the past six months.
- A government-issued picture ID.
- Your preferred form of payment.
- A signed copy of this Psychiatric Services Contract.

Appointment Policy:

We see patients by appointment only. Walk-ins are strictly prohibited. Please arrive 10 minutes early to your initial consultation so that we can devote the full time of the scheduled appointment to complete your evaluation. Please arrive on time to all other appointments. If you are more than ten

minutes late to your initial consultation or any follow-up appointment, we may require that you reschedule the appointment, and you may still be charged the full fee for that visit.

Please do not bring children to appointments who cannot sit in a waiting room alone safely and quietly. We reserve the right to refuse service if we deem the child too young to sit in the waiting room alone.

We do not see both spouses at our practice as patients, to avoid a conflict of interest in case of separation, divorce, or custody issues. Please request a list of other providers if the need arises.

Our psychiatric practice is outpatient only; therefore, we will not follow you or provide treatment to you at any time while you are hospitalized. If hospitalization should occur or become necessary, hospitals generally provide an in-patient psychiatrist. We will attempt to consult with your inpatient treatment team. Depending on availability and best practices to assume ongoing care, we may resume your treatment upon discharge.

Cancellation and Rescheduling Policy:

In consideration of all patients, **if you arrive more than 10 minutes late for an appointment, we may require you to reschedule your appointment and you may still be charged for the visit.** Dr. Varhely is sympathetic to the fact that situations arise in life that may make it difficult to come to an appointment or to give the required notice (car trouble, illness, problems with child care, etc.); therefore, the first late cancellation or missed appointment is free of charge; however, **subsequent missed appointments will be billed full charge.** We are not able to make exceptions beyond this policy. If you are running late, please let us know as soon as possible. **Cancellations of scheduled appointments must be made at least 24 BUSINESS hours before the appointment. This means that if your appointment is on a Monday at noon, you must notify us of the cancellation by noon on the previous Friday. Three no-shows or late cancellations in a 12 month period may result in the termination of our professional relationship.**

Medications:

Please do not take for granted that a previous diagnosis or treatment regimen, including medications, will be assumed by this practice without proper diagnostic measures.

Prescriptions are provided in the office during appointments. You will receive a prescription valid for a sufficient period of time until your next appointment. You are, of course, encouraged to call Varhely & Associates Psychiatry at any time if you have problems with medications. It is your responsibility to ensure that you have an appointment scheduled before prescriptions for your medications expire. Each prescription refill request without an office visit, and/or requests over a weekend, will incur a \$25 fee per refill.

Refills for stimulants and benzodiazepines (FDA Schedule II and III drugs) are provided during scheduled appointments only.

Emergencies and Communications:

In the event of an emergency after hours, call 911 or go to the nearest emergency department. During office hours, if you cannot reach Dr. Varhely and you feel that you cannot wait for your phone call to be returned, call 911 or go to the nearest emergency department. In the event of sudden or severe reactions to medications, call 911 or go to the nearest emergency department.

Dr. Varhely checks phone messages daily and usually returns calls within 24 hours, Monday through Friday. Messages left after noon on Friday may not be returned until the following Monday. Email responses may take up to 3 business days but are usually sent within 24 hours of receipt. When email is used for administrative matters (such as scheduling issues or billing questions) or for communications that don't require a response, no fee is charged. If a patient uses email to ask a care-related question that requires Dr. Varhely's time and clinical expertise, an email consult fee is charged and will be determined by the amount of time required to research and compose a response.

We may need to contact you from time to time during the course of our relationship. Please notify us immediately if there are any changes to your contact information.

Social Media and Networking:

Psychiatric care works best when conducted within a safe, well-bounded setting. As a matter of policy, Dr. Varhely does not interact with patients on social networking sites such as Facebook, LinkedIn, or similar sites. Please don't be offended if your request to connect is declined.

Billing:

Varhely & Associates Psychiatry does not accept insurance.

A \$100 deposit will be taken at the time you schedule an initial appointment with our office. The deposit will be returned or credited if 24 business hours' notice of a cancellation is provided. If you do not show up to an appointment, or if you cancel less than 24 business hours before an appointment, the deposit is forfeited and will be charged to your credit/debit card. We will apply the deposit to the cost of the initial consultation. The balance will be due the day service is rendered.

Payments and balances are due at time of service. Our fee schedule is attached and is incorporated into this contract. For your convenience, our office accepts most major credit cards, cash, and personal checks. We do not accept post-dated checks. There is a \$50 fee for checks returned for insufficient funds. We reserve the right to charge interest on unpaid balances at a rate of 12% per year until the balance is paid. Once service has been rendered, fees are not refundable under any circumstances.

It is your option whether to seek reimbursement from your insurance company for our appointments. We provide "super bills" when requested, which you can then submit to your insurance company for reimbursement as their policy allows.

Varhely & Associates Psychiatry has opted out of the Medicare Program. This means that Medicare will not pay for any care that Varhely & Associates Psychiatry provides to you, except in very limited circumstances. You are responsible for paying for all care that you receive.

We will not be able to see you for Worker's Compensation Injuries. Please contact your employer for further instructions.

Recording Treatment Sessions:

We reserve the right to make audio recordings of sessions for diagnostic and treatment purposes. By signing below, you give your consent to Varhely & Associates Psychiatry to allow audiotaping of your sessions. The contents of each taped session are strictly confidential and will be maintained under the same privacy standards as all records related to your treatment.

Privacy:

We respect your privacy and will maintain all records of your treatment on a confidential basis. **We will not disclose any information about you or your treatment without your written consent, unless we are required or are allowed to do so under applicable law.**

You may obtain copies of your treatment records by requesting them in writing and paying the applicable fee. We will provide you with copies of the records unless we determine that doing so would be harmful to your physical, mental, or emotional health.

Termination of our Relationship.

You may terminate our professional relationship at any time by providing us with notice. We may terminate our professional relationship at any time, subject to our ethical obligations and the rules of the Texas Medical Board, by providing you with notice. Upon request, we will provide you with a list of alternative providers from whom you may seek any additional services that you may need.

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I have read this Psychiatric Services Contract and understand it. I consent to be treated and grant permission to Varhely & Associates Psychiatry to perform such examinations, medical and therapeutic procedures as may be professionally deemed necessary or advisable for my treatment. I agree that I am financially responsible for all charges that I incur with Varhely & Associates Psychiatry. I agree to pay all fees and charges at the time of service.

Patient Signature and Date

Patient's Name (Printed)

Varhely & Associates Psychiatry

Fee Schedule

Initial Evaluation:	\$400 for 50 min interview and 25 min for documenting our visit
Follow Up Appointments:	\$160 for 20 min interview and 10 min for documenting our visit
Psychotherapy Appointments (with or without medication management):	\$320 for 50 min interview and 10 min for documenting our visit
Telephone Consultations:	\$25 per 5 minutes based on length of call
Email Consultations:	\$25 per 5 minutes based on the time spent composing a response and research time, if applicable
Medical Records Requests:	\$35
Lost Prescriptions replacement:	\$25 each
Telephone Medication Refills	\$25 each

We will provide at least one month's notice should there be any changes in the fee charged.

We reserve the right to charge for any letter/report writing, preparation of treatment summaries, completion of insurance forms, lengthy phone contact outside the scheduled appointments, or other such ancillary professional service.