

# Lake City Counseling, LLC

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608 661-2829 Fax: 608 661-0907 2829 Royal Avenue Suite 200 Madison, WI 53713

## **Welcome to Lake City Counseling, LLC**

This informational packet is designed to help you understand our policies and procedures along with your rights as our client. Please read this packet. If you have questions, feel free to ask. Your signature is requested at the end of this packet indicating your understandings and willingness to participate and abide by these policies. We appreciate your trust and confidence in us. We take pride in our training, knowledge, and capabilities, and we want you to know that we are dedicated to giving you quality care.

**Office Hours:** Office hours are varied by each therapist and the amount of days each therapist is in the office. Please call your therapist for his/her specific office hours.

Lake City Counseling, LLC has an on-call therapist for after hour psychiatric emergencies. To reach a provider during their office hours, please call 608-661-2829.

If your emergency is after hours, please call our emergency number at 608-661-0805.

**If your call is an emergency and you do not have time to call us or cannot wait for a therapist to return your call, please call “911” or go directly to your local Urgent Care or Emergency Room.**

**Fee Information:** The initial session will take approximately 60 to 75 minutes. There will be a number of forms for you to complete before the initial session, therefore you will need to arrive 15-20 minutes prior to the scheduled appointment time.

Ongoing therapy sessions last 45-50 minutes.

Treatment sessions vary depending upon need and program. Please check with your therapist as to the fees for your program or you may obtain a fee schedule upon request.

**Prescriptions/Prescription Refills:** We cannot prescribe medications at Lake City Counseling, LLC. If you need a prescription or a prescription refill, please contact your doctor or if your doctor is unavailable, an on-call doctor can prescribe only enough medication for you to get by until your regular doctor returns.

Please See Other Side...

## **Insurance and Billing Information**

**Verification of Insurance Benefits and Precertification:** Your insurance carrier will be contacted to verify outpatient mental health benefits. Most managed care companies require precertification, pre-authorization, or a referral prior to treatment. It is your responsibility to obtain the necessary information for treatment at Lake City Counseling, LLC.

You will also be responsible, at the time of your visit, for any deductible or co-payment not covered by your insurance plan at the time of your visit.

Insurance claim forms are completed by this office as a courtesy to you. Lake City counseling will bill your insurance company. Should your insurance deny payment or pay at less than the amount billed by Lake city counseling, you are responsible for the amount your insurance does not pay- unless your insurance company has made prior arrangements with your therapist. We do not accept responsibility for collecting your claim, or negotiating a settlement on a disputed claim.

**No Show Policy:** Lake City Counseling, LLC, requires a 24-hour cancellation notice, or a “no show” fee may be charged to you. Insurance does not pay this charge; therefore it will be your responsibility to pay this fee.

If you fail to abide by this policy, you will risk termination of treatment after two late cancellations or “no show” appointments.

### **Client Rights and Grievance Procedure:**

As a client at Lake City Counseling, LLC, you have the right to:

- be treated with dignity
- have confidentiality of all treatment records
- review your treatment record
- prompt and adequate treatment of rehabilitation

If you feel that any of these rights have been abridged or have questions concerning any aspect of treatment, please talk with your therapist. If you are not satisfied, you have the right to submit, in writing, to Lake City Counseling, LLC, a statement of your concerns or complaints or you may contact our Client’s Rights Specialist, who is Linda Pfeiffer at Pathway Clinic (608) 643-3663. When received, your statement will be reviewed, and within 30 days, you will receive, in writing, a response. (If you are a Dean Health Plan subscriber, you may contact Dean Health Plan Customer Service with your concerns or complaints). Please sign the letter indicating you have read and understand your rights and responsibilities as a Lake City Counseling, LLC client.

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**Signature**

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**Date**