



## OFFICE POLICIES

### **Treatment Philosophy**

The goal in psychiatric treatment is to work collaboratively to identify your symptoms, define goals, and formulate a treatment plan in order to improve and enhance your life. You are expected to take an active role in your own recovery.

### **Confidentiality and Release of Information**

All records are confidential and secured and will not be released without your authorization.

*Limitations to confidentiality include:*

1. Client authorizes release of information with a signature.
2. Client authorizes release of information for reimbursement purposes as defined by the insurance provider.
3. Client's mental condition becomes an issue in a lawsuit.
4. Client presents as a physical danger to self.
5. Client presents as a danger to others.
6. Child or elder abuse/neglect is suspected.

### **Payment**

All fees are due at the time of service. *Cash, checks, and credit cards are accepted.*

### **Late Cancellation and Missed Appointments**

Appointments must be cancelled a minimum of 24 hours prior to the scheduled appointment time. Messages may be left at any time at the office phone number 614.766.5205.

Fees for late cancellations or missed appointments will be billed to you at:  
\$50 per appointment

### **Complaints**

You have a right to have your complaints heard and resolved within a timely manner. If you have a complaint regarding your treatment, an office policy, or a billing issue please discuss it with Buckeye Psychiatry, LLC immediately.