



GROWTH & GRACE, LLC

856-326-6850

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Welcome to Growth & Grace, LLC! We are committed to providing high-quality, compassionate mental health services in a confidential and professional setting. Please review the following policies and procedures carefully. By signing this document, you are entering into a binding agreement with Growth & Grace, LLC.

*Please be aware the age of consent for mental health counseling services in New Jersey is 16 years old. **If you are 16 years or older, please utilize your signature on this form.***

Counseling Sessions

Initial intake sessions last 60 minutes. Regular sessions thereafter range between 52-60 minutes. Clients typically begin on a weekly basis for the first month unless a different frequency is determined collaboratively with your counselor. Treatment goals will be discussed and reviewed regularly.

Professional Fees

The Professional fees for services at Growth & Grace, LLC are as follows:

Individual Counseling (Self-Pay): \$150 intake; \$135 per session

Couples/Family Counseling (Self-Pay): \$175 intake; \$150 per session

Emergency Telehealth Session: \$150 per session

Treatment summary (1 page): \$100

You may need to contact your counselor via phone. Your counselor will schedule a time with you to speak upon request. Each phone call will be billed as follows:



0-5 minutes: no charge

6-15 minutes: \$25

16-30 minutes: \$50

30-45 minutes: \$75

Phone calls over 45 minutes will be held and billed as a session.

Transactions

Clients are required to keep a credit or debit card on file. All payments are processed via our secure EHR system (Headway). Payment is due at the time of service unless an alternative arrangement is made in writing. Receipts may be provided upon request.

Billing and Insurance

Payment is due at the conclusion of the session unless otherwise agreed upon between Growth & Grace, LLC and client.

Clients are responsible for understanding their insurance coverage, including co-pays, deductibles, and coinsurance. Any changes in insurance must be reported immediately. Failure to do so may result in full self-pay charges. Unpaid balances over 60 days may be subject to collections or small claims court. Legal fees may apply. Sessions will be suspended after 2 unsuccessful attempts to collect payment.

Cancellation and Missed Appointment Policy

We require at least 48 hours notice for cancellations. Late cancellations will incur a \$125 fee. Chronic cancellations may result in release of your recurring appointment time. Telehealth is available if in-person attendance is not possible.

Confidentiality

Your privacy is protected by federal and state law. Confidentiality will only be broken in cases of imminent harm, abuse/neglect, or as required by your insurance. Clients in family or couples counseling must provide individual consent for disclosures. Parents of minors may receive general updates unless harmful.

For Family and Couples Counseling only:

All involved parties must provide their own consent via release of information form before I share confidential information.



Please refer to this site for HIPPA guidelines: <https://www.hhs.gov/sites/default/files/privacysummary.pdf>

Email, Phone Calls and Texting Policy

Growth & Grace, LLC uses non-encrypted email, phone, and text. We do not recommend sharing sensitive data via these channels. Responses will be made within 24 hours during business hours (Mon-Fri, 9AM-6PM). We are unavailable outside these hours. In emergencies, call 911.

Termination of Counseling

Clients may terminate treatment at any time. If two contact attempts are made without response over a 2-week period, we will assume termination. Violent or threatening behavior will result in immediate termination and may involve law enforcement. Appropriate referrals will be provided.

Acknowledgement

By signing this document, you acknowledge that you have read and understand Growth & Grace, LLC's policies and procedures and agree to abide by them.

Client Signature: _____ Date: _____

