



Path to Growth Therapy, LLC

Client Services Agreement and Practice Policies

1. Introduction

Path to Growth Therapy, LLC is owned and operated by Sheila Trabelsi and is proud to provide you with personalized therapeutic support and care. Please read this document carefully as it contains important information about Path to Growth, LLC professional services and business policies. When you sign this document, you acknowledge and agree to follow all Path to Growth, LLC business policies and practices.

- **Purpose:** This document outlines the terms and conditions for therapy and consulting services provided by Path to Growth Therapy, LLC.
- **Agreement:** By signing this agreement, you acknowledge and consent to the terms outlined herein.

2. Therapy Services Offered

1. Individual Therapy Sessions

- Fee: \$180, regular 50min session or below
- Session Plus+: \$220, regular 50 min session + 1-15min call/week as needed
- Extended Sessions: \$288: 90-minute session
- Specialties: EMDR, trauma recovery, anxiety & stress management, life transitions & adjustment issues, addiction, complicated grief.

2. Individual Intensives

- Format: includes 90min pre-intensive session, intensives sessions and a 90min post-intensive session with a customized client workbook.
 - 1 day/8-hour program: \$2555
 - 2 day/11-hour program: \$3510
 - 3 day/14-hour program: \$4490
 - Micro-Intensives (3 hours): \$540 (*for ongoing clients or clients who have previously attended our therapy intensives*)
- Specialties: Complicated Traumatic Grief, Single Event Traumatic Experience, Phobias, Performance Anxiety, Addiction, Inner Child Work.

3. Specialized Relational/Couples Program & Couples Intensives

- Brief Extended Program: 90min/2 hours
 - 6-week program: \$1944/\$2592
 - 8-week program: \$2592/\$3456
- Additional Extended Session Fee: \$324 per 90min session, \$432/2 hours, \$660/3 hours



- Intensive Format: \$5050, includes 2-day Intensive with 90min pre intensive session, 2 (4.5 hour) intensives sessions and a 90min post intensive session with customized client workbook.

4. Immigration Evaluations

- Fee: \$1200
- Expedited Evaluations: \$1800 (under 14 days from last interview, subject to availability)
- Types: Hardship Waiver (I-601/I-601A), VAWA and Spousal Abuse, Asylum, Withholding of Removal and Convention Against Torture, U and T Visas.

3. Other Services *(Releases may be required)*

- **Emergency/30 min Sessions (<30 mins):** \$108 (subject to availability)
- **Testifying:** \$400/hour (2-hour retainer required, plus drive time)
- **ESA Letters:** \$90
- **Reports, Testing, Treatment Summaries, Letters, FMLA/FAMLI paperwork, treatment recommendation letters, Review of Records:** \$180/hour (unless otherwise noted) *(Automatically charge for 1 hour if treatment length has been over a year. Clients in treatment several years may have additional charged)*

4. Trabelsi Coaching and Consulting Services

1. One-on-One Leadership & Business Consulting/ Mindset Coaching

- Fee: \$200 per 60-minute session
- Coaching Subscription Bundles:
 - \$450 (2 sessions, limited weekly Voxer hours)
 - \$850 (4 sessions, limited weekly Voxer hours)

2. Supervision

- Fee: \$100 per hour unlicensed therapists, \$125 per hour for licensed therapists

3. Confident Therapist Virtual Cohort Mentorship Program

- Fee: \$700

5. Payment Policies

- **Payment Methods:** Major credit cards, debit cards, HSA, electronic payments.
- **Billing Options:**
 1. Larger packages: May be billed through my EHR, Stripe or prearranged financing platforms.
- **Financing Options:** Available through CareCredit and Affirm.
- **Payment Requirement:** An active Credit card is required on file for all services.



- **Payment Due:** At the time of service, except for larger packages where payment plans are available. See payment schedule below for more details (*i.e. Therapy Intensives, Mini Intensives Sessions Immigration Evaluations, Coaching Packages, etc.*).
- **Package Discounts:** 10% discount for prepayment of 6 or more sessions, excludes packages/programming (*not applicable for insurance clients*).
- **Sliding Scale:** Limited slots available (\$130-170). Inquire during the initial consultation.

6. Payment Schedule

1. **Individual & Extended Therapy Sessions:** Payment collected at the beginning or end of each session, unless a package discount is set up.
2. **Intensives & Couples Packages:** Your card will be charged a 50% non-refundable deposit of the total package price, due at the time of booking. The remaining balance will be charged 48 hours before your scheduled Intensive.
3. **Immigration Evaluations:** Your card will be charged a \$400 non-refundable deposit towards the total package price, due at the time of booking. The remaining balance will be charged 48 hours before each of your scheduled sessions.
4. **Coaching Clients:** Payment due before each session, charged via autopay 24 hours prior to service.
5. **Supervision:** Payment due before each session, charged via autopay 24 hours prior.

7. Insurance & Reimbursement Services

· Path to Growth Therapy is considered an Out-of-Network provider, depending upon your benefits, you may be eligible for reimbursement. If you wish to seek reimbursement from your insurance company, we can provide you with a superbill which you can submit directly to your insurer, upon your request. This will be provided at the end of each month.

· To make the reimbursement process easier, we have also partnered with Thrizer and Mentaya to ease interactions with insurance companies to obtain your reimbursements, depending upon how much involvement you like to be in the process. Please check with your insurance provider to understand your out-of-network benefits. Please mention during your intake if you are interested in one of these services.

8. No-Show, Cancellation & Rescheduling Policy

Individual Therapy Cancellations-

- **Notice:** We require at least 24 hours' notice for no shows, late cancellations or rescheduling.



- No shows, and cancellations made with less than 24 hours' notice will incur a cancellation fee equivalent to the regular session rate of \$180, unless you are on a sliding scale rate, then it will reflect your sliding scale rate.
 - Rescheduling options within the week may be available on a limited basis at the agreed upon/insurance rate, however, are not guaranteed and will not be held in lieu of your previously scheduled appointment.
 - **Exceptions:** Fees are waived once a year for clients who are ill or have an emergency, however, if there is a pattern of abuse with this rule, this could impact the continuation of treatment.
- o Any other fee exceptions may be made at the therapist's discretion on a very limited basis when circumstances such as illness or emergencies make it impossible to get to your appointment, if you let your therapist know before the session. Fee exceptions may include a discounted fee but are not guaranteed.
- o No accommodation or fee reductions will be made once the charge has been applied, which occurs *15 minutes after the start of the session*, if your therapists has not heard from you and/or you have not responded to attempts to contact via text.
- **Late for Session/Cancellation Procedure:**
- o If you are going to be late to your session, please let your therapist know. Your therapist is willing to hold the slot until you arrive and will continue the session via telehealth or phone (*your preference*) up to 15 minutes after the start of the session, after which time you will be charged for the session.
- o If you would like to start up to 20mins later and do a shorter session, this is also an option rather than being charged the full cancellation fee, if arranged ahead of time before the start of the session. No sessions will be held under 40mins unless previously arranged.
- o Clients are expected to pay the full session cost for their session, if they are late or need to leave early from session. No exceptions will be made to the rate/fee.
- o Your therapist is very attentive to text and emails and so a minimum of 24 hours' notice is expected. Your therapist will confirm receipt of this cancellation, and attempts will be made to reschedule, but it is ultimately your responsibility to reschedule once options have been provided.
- **Missed Sessions/No Shows:**
- o It is a courtesy for your therapist to text, email or potentially call within the first 5 minutes of the session to remind you of your session and is not consistent practice and should not be expected. You receive email reminders 1-2 days before the session and it is your responsibility to



show up for your scheduled time or cancel in a timely fashion.

- o If you are more than 15 minutes late and do not contact your therapist past the 15minute mark, or until well after the session or do not respond to attempts to contact, you will be charged a no-show fee, per policy. Sessions will not be held under 40mins unless previous arrangements were made.

- o If you do not show up or cancel your appointment with less than 24 hours' notice your card on file will be charged as noted above.

- o It should be noted that patterns of misses, illness or emergencies do not exempt you from payment and could result in a cancelation charge and/or termination of service. Missing treatment impacts your outcomes towards your goals and does not align with my business practices. Talk with your therapist about barriers to treatment to see if there is additional support or problem solving that can be implemented to improve your outcomes. Communication is also an important and necessary part of maintaining this therapeutic relationship.

- o *If a pattern of missed appointments and/or lack of communication persists to effectively cancel sessions, and/or 2 or more missed/late canceled appointments occur, you will be charged the late cancelation fee and may be subject to termination of services with this provider as this pattern impacts your working relationship and treatment outcomes.*

Intensives/Specialized Couples Programming/Extended Sessions Cancellations-

In booking your intensive and extended couple's sessions you are making a commitment to your scheduled session times and the intensive therapeutic process. Because Intensive/Extended Session appointments are reserved exclusively for you and require a large amount of time and preparation, and we are not able to backfill them on a last-minute basis a late cancellation fee will be imposed if you cancel under 14 days from the scheduled sessions.

- You will have 48 hours from booking to cancel your Intensive/Extended Session Package for a full refund of your deposit.

- Full fee is due if the Intensive is canceled within 2 weeks of the first schedule intensive day.



- o You will be able to reschedule within 3 months from the cancellation date, based on the availability of the therapist, to reschedule

- If you cancel only 1 of your Intensive days and still hold the other scheduled days you will have the option to reschedule the final/missed day within the month, per therapist availability.

- If a last-minute emergency prohibited you from keeping your appointment, you will be given the opportunity to schedule a new time based on availability within 3 months and will be responsible for your remaining balance when services are rendered.

- For extended sessions, our policy is to charge \$180(*individuals*)/220(*couples*) per hour of your scheduled time that is missed or canceled with less than 48 hours' notice. Make-up sessions will be offered at the extended session price. If a last-minute emergency prohibits you from keeping your appointment, you will have the option to reschedule within the month from the last scheduled session.

Immigration Evaluations Cancellations-

Because Immigration Evaluation appointments are reserved exclusively for you and require a large amount of time and preparation, and we are not able to backfill them on a last-minute basis a late cancellation fee will be imposed if you cancel within 1 week of the appointment.

- If you do not cancel a session 48 hours before the scheduled appointment or do not attend, your down payment will be forfeited.

- To reschedule a missed or late cancelled appointment, another down payment must be paid in advance. There are a few exceptions to this policy (e.g., emergency, severe illness etc.), that will be evaluated on a case-by-case basis.

If you have any questions about the process or our policies, please contact us.

9. Reduced Fees

There may be a limited number of slots available for reduced rates for clients. If you believe you would be eligible for a reduced rate, please talk with your provider.

- The Reduced Rate range is \$130-170 for individual sessions and the rate is at the discretion of your provider. All clients receiving a reduced rate must sign a Reduced Rate Agreement form. The Reduced rate will be assessed yearly and a new agreement must be signed.



Clients eligible for a reduced rate, who do not cancel appointments at least 24 hours in advance are subject to a “Late Cancellation/No Show” charge of \$130. If you are going to be late or must end the session early, there will be no rate adjustments and the fully agreed upon reduced rate will be charged for that session. Reduced Fee Clients who utilize their provider for unscheduled crisis appointments/calls will also be charged the session agreed upon rate. No other reduced rates will be given for additional services.

10. Risks and Benefits

Therapy is not like a medical doctor’s visit and instead calls for you to be an active participant in the process, both in sessions and between sessions.

Therapy can have benefits and risks. Therapy often involves discussing difficult topics and can bring up feelings of sadness, anger, guilt, or hopelessness. However, therapy often has benefits to the people who experience it and may lead to better relationships, solutions to specific problems, and reductions in negative feelings. There is no guarantee that therapy will yield positive results. Every effort will be made to provide you with a positive and healing experience, but every therapy experience is unique and varies among individuals.

If you ever have questions or concerns about the therapy work, we are doing, please feel free to discuss those with me. If we determine that you are not benefiting from therapy or need a different level of care, I will help you in finding appropriate referral resources.

- **Benefits:** Improved mental health, coping strategies, personal growth, enhanced relationships.
- **Risks:** Emotional discomfort, confronting difficult issues, potential worsening of symptoms.

11. Discharge/Termination of Treatment

If you are an ongoing client of Path to Growth, you should attend at least a minimum of 1 scheduled session a month per the standard for outpatient services.

Your length of treatment is determined by many factors including your identified goals, motivation and investment in treatment, diagnosis, and type of treatment etc. You are an integral part of your treatment and so there should be ongoing discussions about your progression and frequency of sessions that fit for you.

Please communicate with your provider if there are things about the session that are not working for you or that you need, or if at any time you would like to change the session frequency to accommodate your circumstances or needs.



Sometimes providers are just not a good fit and that is okay. Feel free to ask about referrals for other providers who may be a better fit and arrange with your provider to cancel future sessions, so that you are not charged a no-show fee.

Your provider may determine that a different therapeutic approach or perspective would better support your progress toward your goals. In such cases, they may recommend adjunct therapy or refer you to another therapist who can meet your unique needs. Please know this recommendation is made with your best interest in mind, recognizing that at times, clients benefit from a new therapeutic modality or fresh insight that another provider may offer.

If you do not attend your last scheduled session, your provider will reach out to offer available session days/times and if you have not responded or have not rescheduled within a month after canceling your last scheduled session, your provider will assume that you are choosing to terminate your treatment and no longer be liable for your care and you will be archived as a client. Consider this your notice of termination in this case.

To reestablish care, please reach out via email at pathtogrowththerapyllc@gmail.com to see if I am taking clients. If it has been several months, you might need a new intake to establish care as many changes may have occurred in your life, including your goals. If I am not able to meet your needs, I will gladly offer you additional resources or therapy referrals.

If your provider terminates your treatment for any other reason outside of what was listed above, you will receive a letter confirming that you have been discharged from treatment with possible referral options to continue treatment.

Reasons your provider may terminate treatment: *(Not all may be listed)*

- If you no show/late cancel 2 consecutive appointments within 60 days; you may be released from my provider's care.
- If you are not making the progress we discussed towards your goals, are not implementing skills/resources discussed in treatment, it may be necessary for us to reassess our therapeutic relationship. It's important that we work together toward meaningful change, and if neither of us see the necessary shifts, we may need to consider whether continuing our sessions is the best path forward.
- If you are unable to consistently pay for sessions at the time of service, and do not have an active credit card on file that is able to accept payments (declines more than once) and incur an outstanding bill, you may be released from your provider's care for not upholding Path to Growth policy agreements.



- If you demonstrate poor boundaries or threatening behaviors towards your provider (*i.e. attempts to contact via social media, comes to home, inappropriate behavior in session towards therapist, uses abusive/sexually explicit language or behaviors when communicating with therapist in or out of therapy session, etc.*) our therapeutic relationship will be dissolved immediately, and you will be released from my care.

12. Confidentiality, Compliance & Record Retention

Your therapist will take appropriate precautions to keep your health information confidential and to not disclose it without your consent. You are also protected under the provisions of the federal Health Insurance Portability and Accountability Act (HIPAA) and any other applicable federal and state laws related to the protection of patient information, including but not limited to Public Health Law § 18.

There are certain exceptions to when your confidential information would not be protected—for instance, if your therapist believes that you will harm yourself or another person or are neglecting or abusing a child or a vulnerable adult as noted in the Mandatory Disclosure section that may require your therapist to take protective action which may include notifying the potential victim, contacting the police, or seeking hospitalization for the client due to risk. If such a situation arises during our work together, I will make every attempt to discuss it fully with you before taking necessary action. In addition, I may disclose confidential information during consultation with other professionals and need to know information if coordinating care with hospitals or while taking protective action with communicating with police. I will make every effort to share only need to know information and where possible protect your identity. Lastly, in the event of an investigation or complaint or civil suit filed against me or if I am ordered to do so by the court of law, I may be required to reveal confidential information. Signing this document gives me permission to consult as needed.

- Records are retained securely in a secure place that assures that only authorized persons have access to the records and protects the confidentiality of the records, for a period of 7 years, commencing on the date of termination of services or the date of the last date of treatment, whichever is later.

- To obtain a copy of your records, clients must submit a written request in letter form.

- Disposition of Records: If the therapist is not available to handle her records due to disability, illness or death or termination of practice, then her estate will designate to Aaron Hill or another appropriate designee to handle the disposition of records.



- Once the 7-year rule has been met, all records containing client identifying data will be destroyed.

13. Electronic Communication

- Confidentiality extends to communications via text, email, telephone, and other electronic means. However, please be aware that while reasonable security measures are implemented, we cannot guarantee the confidentiality of these communications. There is a risk that a third party may access our communications and the information you share should be limited to scheduling purposes.

- Text messages are to be used for administrative purposes only, such as appt reminders, scheduling or changing appointments, billing issues, and other such issues. Please do not email or text about clinical matters; if you need to discuss a clinical matter, please call so we can discuss it on the phone or wait until your next scheduled appointment.

- If you would like to receive text or email reminders for the session, want to include limited text or email communication, you will be asked to sign a consent and acknowledgement of risk.

- If you schedule an appointment or communicate with Provider via email, you are automatically consenting for Provider to respond to your email utilizing the same method, even if you have not completed the email/ text consent you will receive in conjunction with this Agreement.

14. Scheduling Procedure

- Appointments scheduled via text, email, or client portal.
- All required paperwork and autopay must be completed a minimum of 2 days prior to the first appointment to confirm insurance eligibility and billing purposes or you risk your initial session being canceled.
- As a courtesy, future session/services will be scheduled at the time of service.
- It is your responsibility as client to make sure that you have future appointments scheduled and this can be done by phone by texting your provider at 970-344-9177, or by emailing Pathtogrowththerapyllc@gmail.com, or through the client portal on the website: www.pathtogrowththerapy.com.

15. Communication Between Sessions & Crisis

- Urgent matters can be communicated, and I will do my best to return your call immediately or by the end of the next business day (excluding observed holidays).
- If you are unable to reach me and feel that you cannot wait for me to return your call, please contact your family physician or nearest emergency room for assistance.



- If you request an emergency/crisis session, you will be expected to pay the rate of a traditional session. Clients in crisis that require more than an hour session are encouraged to use the emergency protocol below or may be recommended for an extended session at a later date for an additional fee.

- o I only provide crisis support during my scheduled office hours and 1 hour after.

- o If you are experiencing an emergency, please go to your nearest hospital emergency room, or call the Colorado Crisis Hotline at (844) 493-8255.

- Allow 2-3 days for non-urgent inquiries.

- If I will be unavailable for an extended period, I will provide you with the name of a colleague to contact if necessary.

14. Social Media Policy

- I do not accept personal Facebook, LinkedIn, Twitter, Instagram, and/or other friend/connection/follow requests via any social media. Any such request will be denied maintaining professional boundaries.

- Path to Growth Therapy has business social media account pages, but there is absolutely no requirement that you “like” or “follow” this page. If you should “like” or choose to “follow” Path to Growth Therapy’s business social media page, you understand that others will see your name associated with “liking” or “following” that page. You also understand that this applies to any comments that you post on Path to Growth Therapy page/wall. Any comments you post regarding therapeutic work between us will be deleted as soon as possible. You agree that you will refrain from discussing, commenting, and/or asking therapeutic questions via any social media platform, including online review sites and you will instead discuss any concerns or questions with me directly.

- If you have any questions regarding social media, review websites, or search engines in connection to my therapeutic relationship, please contact me immediately and address those questions.

16. Testimony, Court Orders & Appearances

Limitations on Court Testimony

- I do not provide testimony or written reports for custody hearings or family law matters. These issues are outside the scope of my professional practice and expertise.
- I am not available for expert testimony in any legal proceedings. My role as a therapist is to provide therapeutic services, not to serve as a forensic or expert witness.



- Any request for court testimony, depositions, or the release of records will require a retainer fee listed above, signed release of information form and a clear understanding of the scope and limitations of my participation.

Immigration Evaluations

- My court appearances for immigration evaluations are limited to the specific findings of the evaluation. I will not provide testimony outside the scope of the evaluation nor offer opinions beyond the submitted report. Requests may require additional fees for preparation and attendance beyond what has been stated above.

General Limitations

- I will not provide testimony regarding therapeutic progress, mental health diagnoses, or treatment outcomes unless required by law and upon signing a release of information.
- Court orders compelling testimony or the release of information must be handled with the strictest regard to confidentiality and legal requirements. I reserve the right to consult with legal counsel regarding any requests.
- **Cancellation Fees-** Any scheduled court appearances or depositions canceled within 1 week from the scheduled appearance, will result in forfeiting the retainer fee for the reserved time, due to limited ability to fill those time slots.

By engaging in therapy, clients agree to these limitations and acknowledge the boundaries of my professional role in any legal matters.

16. 🌿 Referral Bonus Offer 🌿

Current/Former Clients- If you refer a friend for an intensive and they book, you will receive 1 free session, worth \$180, or a free coaching session, worth \$150

DISCLAIMERS:

Annual Review and Potential Changes to Fees and Policies

Clients will be notified of any changes to fees or policies through our website, and a form will be provided to all active clients for signature. Please note that all fees and policies are reassessed annually and are subject to change.

Services Not Covered by Insurance

*Please note that not all services are covered by insurance due to the specialized nature of the work and the limitations of insurance reimbursement policies. Insurance typically pays one rate for sessions lasting 53 minutes or longer. Due to the time and effort involved and the lack of coding available for such services offered, certain services are considered out-of-pocket and will require an **Acknowledgement of Insurance Exclusion Form** to be signed.*



The following services, while they may be eligible for reimbursement through your plan (not guaranteed), are classified as out-of-pocket services:

- Therapy sessions lasting over 60 minutes/Extended Sessions
- Therapy intensives and micro intensives
- Immigration evaluations
- ADHD evaluations
- Emergency sessions under 30 minutes
- Letters, reports, and testifying
- Reviewing records or creating treatment summaries
- Any specialized programs or packages

If you have any questions about whether a specific service may be reimbursable or require out-of-pocket payment, please feel free to reach out for clarification.

Details of Services, Frequency, and Charges

This document also serves as a "Good Faith Estimate" of what the charges could be for services provided to you. While it is not possible for a psychotherapist to know, in advance, how many psychotherapy sessions may be necessary or appropriate for a given person, this form provides an estimate of the cost of services provided. Your total cost of services will depend upon the number of psychotherapy sessions you attend, your individual circumstances, and the type and amount of services that are provided to you. This estimate is not a contract and does not oblige you to obtain any services from the provider(s) listed, nor does it include any services rendered to you that are not identified here.

This Good Faith Estimate is not intended to serve as a recommendation for treatment or a prediction that you may need to attend a specified number of psychotherapy visits. The number of visits that are appropriate in your case, and the estimated cost for those services, depends on your needs and what you agree to in consultation with your therapist. You are entitled to disagree with any recommendations made to you concerning your treatment and you may discontinue treatment at any time.

This Good Faith Estimate shows the costs of items and services that are reasonably expected for your health care needs for an item or service. The estimate is based on information known at the time the estimate was created.

The Good Faith Estimate does not include any unknown or unexpected costs that may arise during treatment. You could be charged more if complications or special circumstances occur. If this happens, federal law allows you to dispute (appeal) the bill.

If you are billed for more than this Good Faith Estimate, you have the right to dispute the bill.



You may contact the health care provider listed to let them know the billed charges are higher than the Good Faith Estimate. You can ask them to update the bill to match the Good Faith Estimate, ask to negotiate the bill, or ask if there is financial assistance available.

You may also start a dispute resolution process with the U.S. Department of Health and Human Services (HHS). If you choose to use the dispute resolution process, you must start the dispute process within 120 calendar days (about 4 months) of the date on the original bill. There is a \$25 fee to use the dispute process. If the agency reviewing your dispute agrees with you, you will have to pay the price on this Good Faith Estimate. If the agency disagrees with you and agrees with the health care provider or facility, you will have to pay the higher amount.

To learn more and get a form to start the process, go to www.cms.gov/nosurprises or call HHS at (800) 368-1019. For questions or more information about your right to a Good Faith Estimate or the dispute process, visit www.cms.gov/nosurprises or call (800) 368-1019.

Keep a copy of this Good Faith Estimate in a safe place or take pictures of it. You may need it if you are billed a higher amount.

For further questions regarding our fees, services or payments or to schedule a consultation, please reach out. We look forward to working with you on your path to growth

Path to Growth Therapy & Trabelsi Coaching and Consulting

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(970)-344-9177

www.pathtogrowththerapy.com