



Jung Psych Services, LLC

AUDREY B. JUNG
LPC FAPA

FELLOW

AMERICAN
PSYCHOTHERAPY
ASSOCIATION

Office Address

90 S. Kyrene Road
Suite 4
Chander, AZ 85226

Contact Information

Phone: 480.775.6423
Fax: 480.775.6425

www.AudreyJung.com

Welcome to my office. Please get to know my policies.

Getting To Know You

In the first session, after you complete your paperwork, we will talk about your reasons for coming and your current situation. You will be asked questions about the history of your difficulties, your medical background, your substance use (including alcohol and tobacco), as well as your family and social history. You and I will make a treatment plan focusing on your behavioral health needs within your first two sessions. The frequency and duration of your sessions will be based on your individual assessment.

Appointments

I try to offer client the ability to get the support they seek in a timely manner. Office hours are from 7:30am to 2:30pm, Monday through Friday. All appointments may be booked, rescheduled and cancelled online through a secure, interactive auto-scheduler: <http://audrey-jung.com>.

If you would like my office to bill your insurance company, please be sure to complete all the Intake Documents at least 24 hours prior to your appointment. If we do not have these documents on file prior to your first appointment, it will be assumed that you intend to privately fund your sessions. It is important that you are on time for your appointments, and that you call or cancel online 24 hours in advance when you are unable to keep them. *Because you are purchasing a time slot in advance, we require an active credit card to be on file to secure each appointment.*

Failure to show up for your appointment or failure to cancel without 24 hours notice means that someone else is not able to get the help they seek. A \$50 FTC charge will be assessed to you in these circumstances. Clients utilizing EAP benefits will be directed back to their EAP for a referral to a new clinician.

Fees For Service

I have agreed to discount my fees with many insurance companies and employee assistance programs. My office will submit these claims directly, with your permission. Should you choose to activate your benefits, you will be responsible for any non-covered costs, copays or deductibles. Not all services are covered by insurance. You are responsible to verify your benefits. You may also choose to protect your confidentiality by remaining a private pay client. We accept cash and credit cards, and will bill your account for all outstanding balances on your behalf.

CPT CODE	SERVICE	PRICE
90791	Assessment	\$180
90837	Therapy 60 min	\$160
90834	Therapy 45 min	\$120
90834GT	Distance Counseling	\$120
90832	Therapy 30 min	\$80
90847	Couples Therapy	\$120
90839-40	Crisis Intervention	\$180+

FMLA and Short Term Disability

Psychiatric disability compensation is designed to help those who are too sick to work. The presence of a diagnosis does not necessarily imply that an individual has significant functional impairment, nor does it imply impaired capacity to perform specific job tasks or functions. Psychiatric impairments must be severe enough to cause an in-

ability to engage in the consistent demonstration of daily activities, including self care, hygiene, role responsibilities and leisure pursuits. Please be sure to provide a copy of your job description, along with any required paperwork, if you are seeking a Short Term Disability claim. There is a small fee of \$25 for the processing of these forms, and un-

fortunately, no guarantee that your claim will be approved by your company's independent claims adjuster. Because Employee Assistance Plans are designed for assessment and referral purposes only, this service is not available under EAP benefits.

Goals For Therapy

What brings you to the office today?	What are your goals for therapy?
	1.
	2.
	3.

Agreements—Please initial each statement

	I understand the information about insurance reimbursement, and authorize the release of my pertinent health information to my insurer, and the direct payment of my insurance benefits to Audrey Jung, LPC FAPA of Jung Psych Services LLC.
	I realize that I am responsible for all non-covered services, including fees for documentation or appointment cancellation penalties. Arizona law (A.R.S. §12-2295) states that a healthcare provider or contractor may charge a person who requests medical records a reasonable fee for the production of the records.
	I consent to psychological treatment, realizing that it may or may not be of benefit.
	I authorize my therapist, or designee, to contact me by telephone, email or text, and to leave a message for me.
	I understand that Audrey Jung is a Licensed Professional Counselor, and does not perform in a forensic capacity, cannot bill to Medicare, nor prescribe medications.
	I understand that Audrey Jung, LPC is a sole proprietor and that her practice is independent from the other clinicians who share the office suite in which I receive treatment.
	I have reviewed the documentation regarding Short Term Disability, and understand that there is no guarantee that my claim will be approved by my company's insurance adjuster.
	I have reviewed the social media policy, and will take the necessary steps to ensure my own privacy when contacting my psychotherapist via social media platforms.

Consent to Treat

I understand and agree to comply with all of the office policies of Jung Psych Services LLC. I am aware that these policies are viewable on www.AudreyJung.com, and a printed version can be requested if I do not have internet access.

I authorize the charge of my credit card for all services, documentation and appointment cancellation penalties incurred. I have reviewed the office's privacy policy, as required by HIPAA, and am aware that a copy will be given to me upon request.

Signature of Client or Guardian	Date
Printed Name of Client	Client Date of Birth

**JUNG PSYCH
SERVICES, LLC**

Primary Business Address
90 S. Kyrene Road
Suite 4
Chandler AZ 85226

Phone: 480.77.6423
Fax: 480.775.6425

Email:
counselor@AudreyJung.com

www.AudreyJung.com

Primary Insurance Information

Audrey Jung, LPC FAPA has agreed to discount her fees with a number of managed care companies in order to serve as your provider. This clinician may or may not be a preferred provider with your company. Often times, insurance companies will pay similar amounts, even if you choose a provider who is not on their list. To assist you in determining the amount of behavioral health coverage you have, we have created the following worksheet.

It is extremely important that you call your own company to find out about your benefits. You are responsible for session fees owed if the insurance company does not reimburse your provider. Please bring this completed form, your insurance card and a legal photo ID to your initial therapy session.

It is your responsibility to phone your insurance company and fill out this form. These questions are meant to help guide you through the process.

Name of Mental Health Benefit Company:		Is this an Employee Assistance Program?	
		YES	NO
Name of Agent who assisted you:		Date of call:	
		Reference Number:	
Subscriber ID#		What is the Claims Address?	
Plan:			
Group:			
What is the EDI Number?			
Is Audrey Jung, LPC FAPA a Preferred Provider?		YES	NO
Will payments be made directly to Jung Psych Services./Audrey Jung, LPC FAPA?		YES	NO
Do I need an authorization number?	YES	NO	Authorization Number:
How many sessions does this cover?			
When does this authorization expire?	From:		To:
Do I have a deductible to meet for Outpatient Mental Health?	YES	NO	\$
What percentage does my policy pay per session?		%	What is the yearly maximum?
What is my copay? \$			
What is the yearly maximum?			
Is there a requirement that visits not exceed one per week?	YES	NO	
Can two family members see the therapist on the same day, at different times?	YES	NO	
Does my policy cover the following types of therapeutic interventions?			
90847	Couples Counseling/Family Therapy	YES	NO
90837	60 minute therapy sessions	YES	NO
	Is prior authorization required?	YES	NO
90834GT	Distance Counseling	YES	NO

