

Ψ Northwest Neuropsychology Incorporated

www.NorthwestNeuropsych.com

Clinical Neuropsychology Counseling and Psychotherapy

800 E. Woodfield Road
Suite 103
Schaumburg, IL 60173-4718

Rehabilitation Psychology Neurofeedback & Traditional Biofeedback

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Outpatient Services Contract

Welcome to Northwest Neuropsychology, Inc. and the Advanced Biofeedback Center. This document contains important information about Clinical Psychology professional services and business policies. Please read it carefully and jot down any questions you might have so that you and your clinician can discuss them at your next session. Once you sign this, it will constitute a binding agreement between you and your clinician.

Clinical Neuropsychology and Rehabilitation Psychology Services

Clinical Neuropsychology refers to the assessment of human brain functioning and its impact upon behavior. This assessment may consist of any one, or a combination of the following: clinical interview, professional review of academic and work records, traditional paper-and-pencil testing, achievement tests, standardized neuropsychological batteries, behavioral observations of the clinical neuropsychologist, and information obtained from family or friends. Many different types of patients are referred to the Clinical Neuropsychologist, and their diagnoses range from rather subtle --- sometimes nonexistent --- physical problems to rather serious and complicated medical problems. It is the job of the Neuropsychologist to identify the biomedical (physical), psychological, and social factors that may be affecting the patient's behavior as well as to attempt to determine the relative contribution of each of these factors with respect to the patient's problems.

Rehabilitation Psychology may initially commence with some diagnostic assessment, but there is a more significant emphasis on the emotional adjustment, cognitive remediation, or vocational aspirations of the patient. The Rehabilitation Psychologist may utilize a number of different assessment and treatment interventions including --- but not limited to --- individual, marital, or family psychotherapy; cognitive/emotional rehabilitation; applied psychophysiological and biofeedback interventions; career assessment testing and counseling; and behavioral management approaches.

Psychotherapy is not easily described in general statements. It varies depending on the attitudes and experiences of both therapist and patient, as well as the particular problems which the patient brings into the therapeutic relationship. There are probably a number of different approaches that can be utilized to treat the problems you hope to address. *It is not like visiting a medical doctor, in that psychotherapy requires a very active effort on your part, and possibly on the part of significant people in your life.* In order to be most successful, you will need to work on things you and your clinician talk about both during our sessions and at home.

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Applied Psychophysiological Monitoring and Biofeedback is a subspecialty of some psychologists and trained clinicians. The purpose of Biofeedback is to teach clients to control the functioning of their bodies by observing changes on a computer screen.

Biofeedback is considered a *training modality* --- not necessarily a treatment per se --- that can assist in resolving many behavioral and medical disorders. Non-invasive sensors attached to the fingertips, select muscle groups --- and sometimes the head --- detect skin temperature, heart rate, blood pressure, muscle tension, and brain wave activity. By watching graphs or other displays, by listening to musical tones, or receiving verbal instruction, clients learn how to change their physical responses in a desired direction. For example, clients suffering from muscle tension headaches can learn to decrease excessive muscle activity in the forehead. Those with "TMJ" (temporomandibular joint) pain can learn to decrease jaw muscle tension. Migraine (vascular) headache sufferers and those with high blood pressure can learn to lessen their problems by learning relaxation techniques that increase blood flow to fingers and toes, and thus increase skin surface temperature. Brain wave biofeedback (also called *EEG Biofeedback* or *Neurofeedback*) --- an intervention in existence for over 40 years --- has gained greater and greater support in recent years, especially with the advent of faster personal computers and more sophisticated digital signal processing. One type of brain wave biofeedback training has a goal of increasing the amount (amplitude) of Beta wave and SMR activity while suppressing Alpha and Theta wave activity. The result is that clients can learn to increase their attention and concentration and be less likely to be distractible. Brain wave biofeedback (EEG Biofeedback / Neurofeedback) has been implicated as a promising intervention for childhood and adulthood attention deficit disorder, certain types of seizure disorders, and as an intervention to help those with addictive disorders to develop resistance to relapse. (Note that during the COVID-19 Pandemic office biofeedback sessions have been temporarily postponed for the health, safety, and well-being of patients and staff.)

Psychological Assessment and Intervention: General Principles

Like any type of health-related testing or treatment, psychological assessment and interventions can have both risks and benefits. Risks sometimes include experiencing uncomfortable feelings such as sadness, guilt, anxiety, anger, frustration, loneliness, and helplessness. Although necessary for adequate diagnosis and treatment planning, psychological assessments may be threatening and upsetting to some patients. For example, **sometimes assessments identify weaknesses in intellectual capacity, memory, or emotional problems.**

Psychotherapy often requires discussing unpleasant aspects of your life. At the same time, however, psychotherapy has also been shown to have benefits for people who undertake it. Therapy often leads to a significant reduction in feelings of distress, better

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relationships, and resolution of specific problems. But there are no guarantees about what will happen.

Applied psychophysiological interventions such as the various forms of biofeedback (including neurofeedback) are as successful as the client's investment and beliefs in the experience. Psychological and medical interventions are most successful when the client follows instructions and attends scheduled sessions—whether via telepsychology or in-person appointments, if scheduled.

Patients Typically Seen in a Rehabilitation/Neuropsychological Practice

Although **most patients seen in a Rehabilitation Psychology / Neuropsychological practice have been diagnosed with some type of medical disorder** (e.g., stroke, traumatic brain injury, dementia, multiple sclerosis, sleep apnea, headache, back pain, irritable bowel syndrome, attention deficit disorder, and myriad other diagnoses), **patients with more common behavioral health (psychological) problems are also seen.** Such psychological diagnoses include major depression, generalized anxiety disorder, panic attacks, posttraumatic stress disorder, obsessive-compulsive disorder, attention deficit disorder, marital conflict, and many other disorders.

On occasion, clients may be seen in a Rehabilitation Psychology / Neuropsychology practice for "peak performance" training. Such clients may be functioning quite well in their personal, academic, and professional lives, but they wish to further enhance their psychological and physical abilities to perform routine tasks with greater skill, speed, agility, and efficiency. An athlete, attorney, medical doctor, college professor, actor, musician, or other professional may benefit from psychotherapy, biofeedback, or cognitive rehabilitation.

The Course of Psychological Assessment and Treatment

The first few sessions will involve an evaluation of your needs. By the end of the evaluation, your clinician will be able to offer you some initial impressions of what your work will include and an initial treatment plan to follow, if you decide to continue with your clinician. You should evaluate this information along with your own assessment about whether you feel comfortable working with your clinician. Therapy involves a large commitment of time, money, and energy, so you should be very careful about the therapist you select. If you have questions about your clinician's procedures, you should discuss them whenever they arise. If your doubt persists, your clinician will be happy to help you to secure an appropriate consultation with another mental health professional.

Meetings / Scheduled Sessions

It is customary to conduct an evaluation that may require one to three sessions. During

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this time, you can decide whether your clinician is the best person to provide the services that you need in order to meet your treatment objectives. Depending upon the reason for meeting --- diagnostic interview, personality testing, neuropsychological assessment, psychotherapy, or applied psychophysiological treatments --- sessions may range from an hour (the traditional "50-minute hour") to four or more hours in one day. If psychotherapy is initiated, your clinician will usually schedule one fifty-minute session per week at a mutually agreed time, although sometimes sessions will be longer or more frequent. **Once this appointment hour is scheduled, you will be expected to pay for it unless you provide more than 24 hours advance notice of cancellation.** On occasion, there may be circumstances that are beyond your control, and there may be some instances, therefore, in which the fee may be waived. Ideally, your clinician will attempt to find another time to reschedule the appointment. **For telepsychology sessions, please click the invitation link or sign into Doxy.me at least 10 minutes prior to your scheduled session.**

Professional Fees

The initial evaluation of every new patient is \$320.00. If you do not have health insurance, the cost of the initial evaluation is the patient's responsibility and is to be paid in cash, check, or credit card at the time that the services are rendered. The hourly fee is \$280.00 for individual or family psychotherapy sessions. Certain diagnostic testing sessions require report writing and more clerical work and therefore will be billed at a slightly higher rate (e.g., Neuropsychological Testing with Interpretation and Report per hour @ \$320.00 per hour). In addition to weekly fees, it is usual practice to charge this amount on a prorated basis for other professional services you may require such as report writing, telephone conversations which last longer than 5 minutes, attendance at meetings or consultations with other professionals which you have authorized, preparation of records or treatment summaries, or the time required to perform any other service which you may request of your clinician. If you are currently involved in litigation or become involved in some type of legal situation in the future which requires your clinician's participation, you are expected to provide reimbursement for the professional time required even if your clinician is compelled to testify by another party. **Because of the complexity and difficulty of legal involvement, \$800.00 per hour is the usual charge for preparation for --- and attendance at --- any legal proceeding.**

Billing and Payments

You will be expected to pay for each session at the time it is held, unless you and your clinician agree otherwise or unless you have insurance coverage which requires a co-pay. Payment schedules for other professional services will be agreed to at the time these services are requested. For example, an entire course of Neurofeedback (EEG or Brainwave Biofeedback) may range from 40 - 80 sessions, even more sessions for complicated cases. A separate contract for provision of these services may be made with

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each patient, and a discount is provided for pre-payment of "blocks" of sessions.

In circumstances of unusual financial hardship, your clinician may be willing to negotiate a fee adjustment or installment payment plan. A billing service will maintain a computerized accounting of services rendered, including dates, procedures, outstanding payments, etc. If your account is more than 60 days in arrears and suitable arrangements have not been agreed to, your clinician has the option of using legal means to secure payment, including collection agencies or small claims court. If such legal action is necessary, the costs of bringing that proceeding will be included in the claim. In most cases, the only information a clinician can release about a client's treatment would be the client's name, the nature of the services provided, and the amount due.

Insurance Reimbursement

In order for us to set realistic treatment goals and priorities, it is important to evaluate what resources are available for you to pay for your treatment. If you have a health insurance policy, it may provide some coverage for psychological assessment and treatment. It is also possible, however, that you may have limited or no insurance coverage for certain psychological services (e.g., cognitive rehabilitation; applied psychophysiological monitoring and biofeedback; individual or family psychotherapy). In such a case, you will need to commit to "self-pay" status. **(In the current era of "managed care's" intrusion into one's privacy, an increasing number of clients are choosing to forego insurance reimbursement for psychological services and instead negotiate self-pay arrangements.)**

Please also beware that many health care insurance companies have separate "behavioral health" (psychiatric, "mental health") providers under contract with them. With the proliferation of managed care companies --- HMOs, PPOs, point of service plans, etc., etc. --- preauthorization or precertification may be necessary. Your clinician will provide you with whatever assistance possible in facilitating your receipt of the benefits to which you are entitled, including filling out forms as appropriate. **However, you --- not your insurance company --- are responsible for full payment of the fee that you and your clinician have agreed to. Therefore, it is very important that you find out exactly what psychological services your insurance policy covers. If you have an official HMO Referral, you are responsible for your co-pay, and Northwest Neuropsychology will send any claims to the HMO. If you are in a PPO, you will be responsible for any deductible, co-insurance, and/or co-pay after Northwest Neuropsychology receives the insurance payment.**

You should carefully read the section in your insurance coverage booklet that describes mental health and other psychological services. If you have questions, you should call your

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plan administrator and inquire. Of course, your clinician will provide you with whatever information he or she can based on his or her experience and will be happy to try to assist you in interpreting the information you receive from your carrier. If necessary to resolve confusion, your clinician may be willing to call the carrier on your behalf.

As noted above, the escalation of the cost of health care has resulted in an increasing complexity about insurance benefits which sometimes makes it difficult to determine exactly how much mental health or psychological coverage is available. "Managed Health Care Plans" such as HMOs and PPOs often require advance authorization before they will provide reimbursement for mental health services. These plans are often oriented towards a short-term treatment approach designed to resolve specific problems that are interfering with one's usual level of functioning. It may be necessary to seek additional approval from your insurance company after a certain number of sessions. In most clinicians' experience, while a good deal can be accomplished in short-term therapy, many clients feel that more services are necessary after insurance benefits expire. At that point, you may need to consider a self-pay arrangement. Please be advised that under the provisions of my contract with some managed care plans, your clinician may not be allowed to continue to provide services to you once your benefits have expired. If this is the case, the clinician will do his or her best to find you another provider who will help you continue your assessment and/or treatment. You should also be aware that most insurance agreements require you to authorize your clinician to provide a clinical diagnosis, and sometimes additional clinical information such as a treatment plan or summary, or in rare cases, a copy of the entire record. This information will become part of the insurance company files, and, in all probability, some of it will be computerized. **All insurance companies keep such information confidential, but once it is in their possession, your clinician has no control over what they do with it. In some cases they may share the information with a national medical information databank.** If you request it, your clinician will provide you with a copy of any report submitted to the insurance company.

Once your clinician has all of the information about your insurance coverage, you and your clinician will discuss what you can expect to accomplish with the benefits that are available and what will happen if the insurance benefits run out before you feel ready to end our sessions. **It is important to remember that you always have the right to pay for services yourself and avoid the complexities which are described above and the intrusion into your privacy which occurs with third-party payment.**

Contacting Your Clinician

Northwest Neuropsychology Inc. associates are often not immediately available by telephone. While they are usually in the office during the day and certain evenings and Saturdays, typically they will not answer the phone when they are with a client. However, you should feel free to contact your clinician via voicemail at 847.240.0444. Simply follow

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the instructions. **To bypass the long voicemail, press "1" for Dr. Eschbach and follow the prompts. (A message may be sent as "Urgent" by following the appropriate prompts.) Please leave your telephone number, message, and advise where you are located at that time.**

For routine messages, your clinician will make every effort to return your call on the same day with the exception of weekends and holidays. If you are difficult to reach, please leave some times when you might be available. If you cannot reach your clinician, and you feel you cannot wait for a return call, you should call your psychiatrist, family physician, or the emergency room at the nearest hospital ask for the physician on call. If your clinician is unavailable for an extended time, he or she will provide you with the name of a trusted colleague whom you can contact if necessary.

Professional Records

Both law and professional standards require that all clinicians keep appropriate records. You are entitled to receive a copy of the records, but if you wish, your clinician can prepare a summary. Because these are professional records, they can be misinterpreted and/or can be upsetting to lay readers. If you wish to see your records, your clinician will probably recommend that you review them in his or her presence so that you can discuss the contents together. Clients will be charged an appropriate fee for any preparation time that is required to comply with an information request.

If you are under 18 years of age, please be aware that the law may provide your parents with the right to examine your treatment records. It is our policy to request an agreement from parents that they consent to give up access to your records. If they agree, your clinician will provide them only with general information about your work together unless your clinician feels that there is a high risk you will seriously harm yourself or another, in which case your clinician will notify them of his or her concern. Your clinician will also provide them with a summary of your treatment when it is complete. Before giving them any information, your clinician will discuss the matter with you if possible, and he or she will do the best possible to resolve any objections you may have about what he or she is prepared to discuss.

Confidentiality

In general, confidentiality of all communications between a client and a psychologist is protected by law, and your clinician can only release information about your work together to others with your *written* permission. The policy of Northwest Neuropsychology Incorporated and its clinicians is to follow federal guidelines set forth by the HIPAA (Health Information Portability and Accountability Act) and the mental health code of the State of Illinois. There are some exceptions to confidentiality, however.

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In most judicial proceedings, you have the right to prevent your clinician from providing any information about your treatment. However, in some circumstances such as child custody proceedings and hearings in which your emotional condition is an important element, a judge may require your clinician's testimony if he or she determines that resolution of the issues before him or her demands it. There are some situations in which your clinician is legally required to take action to protect others from harm, even though that requires revealing some information about a client's treatment. For example, if your clinician believes that a child, elderly person, or a disabled person is being abused, he or she must file a report with the appropriate state agency.

If your clinician believes that a client is threatening serious bodily harm to another, he or she is required to take protective actions, which may include notifying the potential victim, notifying the police, or seeking appropriate hospitalization. If a client threatens to harm himself or herself, the clinician may be required to seek hospitalization for the client, or to contact family members or others who can help provide protection. Although these situations rarely arise in psychological practices, should such a situation occur with you, your clinician will make every effort to fully discuss it with you before taking any action.

Clinicians may occasionally find it helpful to consult about a case with other professionals. In these consultations, your clinician will make every effort to avoid revealing your identity. The consultant is, of course, legally bound to keep the information confidential. Unless you object, your clinician will not tell you about these consultations unless he or she feels that it is important to your work together.

While this written summary of exceptions to confidentiality should prove helpful in informing you about potential problems, it is important that you and your clinician discuss any questions or concerns that you may have at your next meeting. The laws governing these issues are quite complex, and your clinician is not an attorney. While your clinician is happy to discuss these issues with you, should you need specific advice, formal legal consultation may be desirable. If you request, your clinician will provide you with relevant portions or summaries of the applicable state laws governing these issues.

Your signature below indicates that you have read the information in this document and agree to abide by its terms during your professional relationship with your clinician.

Client _____

Clinician _____

Date _____

Date _____