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and
Jungian Analyst-in-training

Welcome! This is where I describe important information about my practice. Please read it carefully and note any questions you might have so that we can discuss them.

What I Offer

As a trauma-informed depth psychotherapist and Jungian Analyst-in-Training, my understanding is that suffering and symptoms are meaningful patterns. They are the psyche's way of trying to get what it needs and for each of us to live our fullest lives. My goal in our work together will be to help us understand what your symptoms are calling for, what your suffering means, and to facilitate rewarding relationships to yourself and your life. Through these relationships, suffering transforms. To do this, we will be keeping our ear to what is going on below the surface, in the unconscious, as well as what is happening on the surface in your waking life. Our process might include talking, dreamwork, work with a therapeutic sand tray, expressive art, somatic awareness, psychoeducation, and attention paid to feelings and experiences in our relationship and to the present moment in general. We may also discuss the use of EMDR (Eye Movement Desensitization Reprocessing) and other trauma-informed modalities as needed.

Please note, **services that I do NOT provide** include disability assessments or court-related evaluations and assessments. I am happy to refer you to someone else if this is a concern of yours.

Our Relationship

The therapeutic relationship is unique and different than other relationships. It is different in how long it lasts, the topics discussed, the goals set, and how interaction takes place inside and outside of the therapy office. I will not be your supervisor, teacher, or friend. I will not give legal, medical, or financial advice and I will not have any other business relationship with you. Therapists are required to keep the identity of our patients confidential. I live and have an in-person office in Vermont. If you are in the area and we happen to see each other in public, you may choose to pretend you do not know me and I will do the same. You may also greet me, and I will respond, but you do not need to introduce me to anyone present. Due to the nature of living in small towns, there may be individuals we mutually know, and even if you have shared with them that I am your therapist, I will not divulge our relationship. Finally, our relationship will be a crucial focus for our work together as issues and patterns that bring one to therapy often show up in the consulting room in our relationship of therapist and client. Together we will use a here-and-now approach to explore the dynamic of these patterns so that newer and healthier patterns can form.

Sessions

The standard session time is about 53 minutes. If you are late, we will end on time. If I am late, you will still receive your full 53 minutes for the session. This time may be provided at the end of that session, or during a future session.

Professional Fees

My fee is \$150 per 53-minute individual session.

In addition to weekly appointments, I may charge this amount for other professional services you may need, though I will break down the hourly cost if I work for periods of less than one hour. Other services include report writing, telephone conversations lasting longer than 15 minutes, attendance at meetings with other professionals you have authorized, preparation of records or treatment summaries, and the time spent performing any other service you may request of me. If you become involved in legal issues that require my participation, you will be expected to pay for my professional time even if I am called to testify by another party. I do not provide court-related services. However, should I be legally mandated to be involved, I charge \$400/hour for preparation and attendance at any legal proceeding. Please note that insurances do not cover fees outside of our regular therapy sessions.

Billing and Payment

You will be expected to pay for each session at the time it is held, unless we agree otherwise or unless you have insurance coverage which requires another arrangement. Payment schedules for other professional services will be agreed to when they are requested. In circumstances of unusual financial hardship, I may be willing to negotiate a fee adjustment or payment plan.

If your account has not been paid for more than 60 days and arrangements for payment have not been agreed upon, I have the option of using legal means to secure the payment. This may involve hiring a collection agency, going through small claims court, or reaching out to your emergency contact to get ahold of you. If such legal action is necessary, its costs will be included in the claim. In most collection situations, the only information I release regarding a patient's treatment is a name, the nature of 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 you have available to pay for your treatment. If you have a health insurance policy, it will usually provide some coverage for mental health treatment whether I am in network or not. I will provide you with whatever assistance I can in helping you receive the benefits to which you are entitled; however, you (not your insurance company) are responsible for full payment of my fees. It is important that you find out exactly what mental health services (sometimes referred to as "behavioral health") your insurance policy covers. You should carefully read the section in your insurance coverage booklet that describes mental health (or behavioral health) services. If you have questions about the coverage, call your plan administrator. Of course, I will provide you with whatever information I can based on my experience and will be happy to help you in understanding the information you receive from your insurance company.

Contacting Me

I am often not immediately available by telephone. I will not answer the phone when I am with a patient. When I am unavailable, my telephone is answered by confidential voicemail that I monitor frequently. I will make every effort to return your call within 24 hours, except for weekends and holidays. Please inform me of some times when you can be reached. If you are unable to reach me and feel that you can't wait for me to return your call, contact your family physician or the nearest emergency room and ask for psychiatric services. If I will be unavailable for an extended time, I will provide you with the name of a colleague to contact, if necessary.

You may utilize my email address to share information with me, but **please note**, that although it is password protected, I cannot guarantee confidentiality of the contents. Our therapy sessions take place in person or on a secure telehealth platform so I will be unable to engage in any back-and-forth

communication of information via *any* electronic means that would typically be discussed during our regularly scheduled time unless we have scheduled a regular session via secure video chat or phone. You may also text me for scheduling purposes. I will not engage in conversation via text beyond these purposes.

In Cases of Emergency

If there is a serious emergency, or you are feeling unsafe, it is important that you get the immediate help you need by going to a local emergency room, calling 911 or your local mental health center. If you are in distress, you may call me. I will attempt to return your call as soon as possible, although I may not be able to get to your message immediately. In addition, there may be times during our work together in which I become concerned with your personal safety. I may need to contact someone close to you, such as a parent, family member, spouse, or close friend. I will ask you to sign a release of information for an emergency contact to allow us to make this contact if necessary.

Cancellation Policy

I consider our work together to be very important and hold a spot in my schedule just for you. Due to the unique nature of psychotherapy, I do not hold spaces for random acute drop-ins and do not have a large patient pool like your doctor's office does. Therefore, if you do not show up, I do not get paid for the time I show up for you. There are, of course, always times that you will need to cancel a session. Here is my cancellation policy so that I can continue to hold your place:

If you are unable to keep an appointment, please notify me immediately. If you miss a session without calling, give less than a 24-hour notice for a cancellation, or are unable to attend at least 20-minutes of a regularly scheduled session, you will be charged my full fee (\$150) for the missed appointment *regardless of the reason*. This includes illness. If it is possible, we will try to find another time within the next 7 days to reschedule the appointment. If we are able to reschedule, your cancellation will be waved. You may cancel up to 4 sessions in a calendar year without being charged so long as you provide me with 24-hours' notice that you will be unable to make the session. For additional cancellations beyond those 4 in a calendar year, you will be responsible for my full fee (\$150) regardless of the reason for not showing or cancellation notice time. If the missed session is due to my cancellation or due to my office being closed for any reason, including holidays, it will not count toward one of the 4.

Clients covered by Medicaid insurance legally cannot be billed for cancellation fees. However, patterns of missed sessions or late cancellations will result in losing a place in my schedule. In general, if you miss more than three appointments within two months, or if you miss more than 6 appointments in a calendar year, I will no longer hold your place in my schedule. Any missed appointment will be discussed openly and assessed together to determine the possible impact on your therapy. Everything that happens in our work is meaningful and we will explore this meaning together.

Professional Records

The laws and standards of my profession require that I keep treatment records. You are entitled to request a copy of your records, or I can prepare a summary for you instead. Because these are professional records, they can be misinterpreted and/or upsetting to untrained readers. If you wish to see your records, I recommend that you review them in my presence so that we can discuss the contents. I charge an appropriate fee for any professional time spent in responding to information requests.

Confidentiality in Couples, Relationship, and Family Treatment

In couples, relationship, and family treatment, you should be aware that I do not keep secrets. Information shared with me outside of sessions may be disclosed to the members of the couple/family who are also participating in treatment. A disclosure of this nature may occur when the information is relevant to the treatment in which both parties are participating, and every effort to advise you of the necessity to disclose this information will be made. As with any other treatment, everything in our meetings is confidential and therefore no one outside the members of the relationship working with me has any access to what is discussed.

Confidentiality

As I just mentioned, the privacy of all communications between a client and a psychotherapist is protected by law, and I can only release information about our work to others with your written consent.

There are some exceptions. In most legal proceedings, you have the right to prevent me from providing any information about your treatment. In some proceedings involving child custody and those in which your emotional condition is an important issue, a judge may order my testimony if he/she determines that the issues demand it.

There are some situations in which I am legally obligated to take action to protect others from harm, even if I have to reveal some information about a patient's treatment:

- If I believe that a child, elderly person, or person with a disability is being abused, I am required to file a report with the appropriate state agency.
- If I believe that a patient is threatening serious bodily harm to another, I am required to take protective actions. These actions may include notifying the potential victim, contacting the police, or seeking hospitalization for the patient.
- If the patient is *planning* to harm themselves, I may be obligated to seek hospitalization for them or to contact family members or others who can help provide safety.

If a similar situation occurs, I will make every effort to fully discuss it with you before taking any action.

Additionally, I may occasionally find it helpful to consult other professionals about a case. During a consultation, I make every effort to avoid revealing the identity of my patient. The consultant is legally bound to keep the information discussed confidential. I may tell you about these consultations only if I feel it is important to our work together.

The End of Treatment

Typically, the end of our work together will occur gradually as symptoms are reduced and goals are met. Ideally, the termination process, as with the initial establishment of goals, will be a collaborative process. It often looks like agreeing that ending is appropriate, setting an end date, and continuing to meet regularly until that date to discuss any thoughts and feelings that arise during that termination period. During the termination period, clients can experience a wide range of feelings: feelings of loss, abandonment, happiness, doubt, an increase in self-confidence, and some anxiety about the future. At times, a client's behavior or mood may briefly deteriorate. These feelings are typical and important to discuss. Also, it is typical to return to therapy for a brief time for "tune up" sessions after termination, or to return to therapy when new issues arise in life during which our familiar relationship can be supportive for continuing therapeutic work.

There are times where termination may occur prematurely by either the therapist or the client. A therapist has the right to terminate treatment for reasons including: Non-payment of fees with no mutual agreement on future payment, repeated cancellations or no-shows in a short period of time, ethical conflicts, lack of therapeutic progress, therapist illness, retirement, and personal challenges. There are times, a therapist may terminate and refer his/her client to another therapist if a difficulty arises that cannot be treated within the limits of my scope of my competence.

If you decide to terminate therapy with me, I request that we meet for at least one closing session to address your concerns with the therapy or myself. As part of our relationship, my intention is to do any repair work needed and explore any meaning in our relational experiences. It is common for clients to want to terminate when difficult material in therapy begins to be addressed. Although it can be a difficult process, it is often helpful for therapist and clients to work through the issue at hand together in a skillful way rather than terminate the relationship with unprocessed difficult feelings. If premature termination happens, I will make sure to connect you with another therapist if you would like.

Telehealth

Telehealth includes the practice of mental health care delivery, diagnosis, assessment, consultation, and treatment using live interactive and secure audio-video software. For telehealth, I use a version of Zoom that is HIPAA compliant which means appropriate for confidential meetings. In the event that there is an unexpected disruption to a telehealth session, we will use other means of communication to reschedule our meeting such as phone or text. We can also continue by telephone.

Notice of Privacy Practices

I am required by federal and state law to maintain the privacy of your health information, as well as give you this notice about privacy practices, legal obligations, and your rights concerning your health information, "Protected Health Information" (PHI). I must follow the privacy practices that are described below and these practices may be amended as needs or requirements change.

Uses and Disclosures of Your Protected Health Information

The following will explain the ways in which your health information may be used *without your consent* under Federal and State law. In all cases, I practice disclosing minimum information necessary to achieve the purpose of said disclosure. This is not intended to be an exhaustive list, but instead an explanation of cases and scenarios where disclosure of PHI may be necessary, falling under general categories. These disclosures exclude psychotherapy notes as described in the next section.

- A. Treatment: I may use and disclose information related to your treatment to members of your current treatment team for the purposes of continuity of care and to coordinate and manage your healthcare and related services when mandated or in order to keep you safe.
- B. Payment: I may use and disclose information in your protected health record for billing purposes with your insurance plan. Your insurer may require certain information about your treatment prior to authorizing payment for services.
- C. Health Care Operations: These include quality improvement activities, consultation with colleagues, licensing, and credentialing activities.
- D. Wherever required by law, your protected health information will be disclosed.
- E. In the event of an emergency your protected health information may be disclosed in order to allow for your treatment and care.

Uses and Disclosures Requiring Written Consent

My notes documenting the contents of your session (Psychotherapy Notes), will be used only by myself and will not otherwise be used or disclosed without your written authorization. Marketing activities will never include your protected health information without your written approval. Any disclosure to individuals not directly involved in your treatment or care (ie: your attorney, spouse, school, etc.) will require your written authorization for release of your protected health information. **Note:** Your authorization to release PHI may be revoked at any time by providing the revocation in writing. This revocation will go into effect when the written notice has been personally received and reviewed.

Your Rights Regarding Your Health Information

A. Right to Inspect and Copy: You have the right to inspect and copy your medical and billing records. All requests of this nature must be made in writing. There will be a fee associated with copying records and mailing records if you chose to receive them via mail.

B. Right to Request Confidential Communications: You have the right to request that I communicate with you only in a certain location or through a certain method (i.e. at work only, or through email, etc.) All requests must be received in writing and reasonable requests will be honored. A reason for the request is not necessary, but it is important to know the specifics on where and how you wish to be contacted.

C. Right to Request Restrictions: You have the right to request a restriction on the health information that is used or disclosed about you for treatment, payment, or health care operations. Requests for restrictions must be submitted in writing. I am not required to agree with your requested restriction, however, I will honor your request unless the restricted health information is needed to provide you with emergency treatment.

D. Right to Accounting of Disclosures: You have the right to request to be provided with an accounting of the disclosures that have been made of your protected health information. This request must be made in writing and will not include disclosures made for the purposes of treatment, payment, and health care operations.

E. Right to Request an Amendment: You have the right to request amendment of your health information. Your request must be made in writing and should detail the reason for the requested amendment. This request may be denied in certain circumstances.

F. Right to a Paper Copy of this Notice: You have the right to obtain a paper copy of this Notice of Privacy Practices at any time.

G. Out-of-Pocket-Payments: If you paid out-of-pocket (or in other words, you have requested that we not bill your health plan) in full for a specific item or service, you have the right to ask that your Protected Health Information with respect to that item or service not be disclosed to a health plan for purposes of payment or health care operations, and we will honor that request.

H. Right to Get Notice of a Breach: You have the right to be notified upon a breach of any of your unsecured Protected Health Information.

I. Questions or Complaints: Please address questions or complaints regarding your privacy rights should be addressed with me at any time. You may also contact the Secretary of the U.S.

Department of Health and Human Services. You will not be retaliated against should you chose to complain to me or an outside agency.

Statutory Definition of Unprofessional Conduct

I am required by law (§ 3016) to inform you of what constitutes unprofessional conduct in psychotherapy and how to report it. Unprofessional conduct means the conduct listed in this section and in section 129a of Title 3:

- (1) Failing to make available, upon written request of a person using psychological services to succeeding health care professionals or institutions, copies of that person's records in the possession or under the control of the licensee.
- (2) Failing to use a complete title in professional activity.
- (3) Conduct which evidences moral unfitness to practice psychology.
- (4) Engaging in any sexual conduct with a client, or with the immediate family member of a client, with whom the licensee has had a professional relationship within the previous two years.
- (5) Harassing, intimidating, or abusing a client or patient.
- (6) Entering into an additional relationship with a client, supervisee, research participant or student that might impair the psychologist's objectivity or otherwise interfere with the psychologist's professional obligations.
- (7) Practicing outside or beyond a psychologist's area of training or competence without appropriate supervision.
- (8) Notwithstanding the provisions of 3 V.S.A. § 129a(a)(10), in the course of practice, failure to use and exercise that degree of care, skill and proficiency which is commonly exercised by the ordinary skillful, careful and prudent psychologist engaged in similar practice under the same or similar conditions, whether or not actual injury to a client or patient has occurred.
- (9) Conduct which violates the "Ethical Principles of Psychologists and Code of Conduct" of the American Psychological Association, effective December 1, 1992, or its successor principles and code.
- (10) Conduct which violates the "ASPPB Code of Conduct-1990" of the Association of State and Provincial Psychology Boards, or its successor code. (Added 1975, No. 228 (Adj. Sess.), § 2; amended 1981, No. 241 (Adj. Sess.), § 1; 1993, No. 98, § 7; 1993, No. 222 (Adj. Sess.), § 3; 1997, No. 145 (Adj. Sess.), § 50; 1999, No. 52, § 26; 1999, No. 133 (Adj. Sess.), § 24.)

§ 129a. Unprofessional conduct

- (a) In addition to any other provision of law, the following conduct by a licensee constitutes unprofessional conduct. When that conduct is by an applicant or person who later becomes an applicant, it may constitute grounds for denial of a license or other disciplinary action. Any one of the following items, or any combination of items, whether or not the conduct at issue was committed within or outside the state, shall constitute unprofessional conduct:
- (1) Fraudulent or deceptive procurement or use of a license.
 - (2) Advertising that is intended or has a tendency to deceive.
 - (3) Failing to comply with provisions of federal or state statutes or rules governing the practice of the profession.
 - (4) Failing to comply with an order of the board or violating any term or condition of a license restricted by the board.
 - (5) Practicing the profession when medically or psychologically unfit to do so.
 - (6) Delegating professional responsibilities to a person whom the licensed professional knows, or has reason to know, is not qualified by training, experience, education or licensing credentials to perform them.
 - (7) Willfully making or filing false reports or records in the practice of the profession; willfully impeding or obstructing the proper making or filing of reports or records or willfully failing to file the proper reports or records.
 - (8) Failing to make available promptly to a person using professional health care services, that person's representative, succeeding health care professionals or institutions, upon written request and direction of the person using professional health care services, copies of that person's records in the possession or under the control of the licensed practitioner.

- (9) Failing to retain client records for a period of seven years, unless laws specific to the profession allow for a shorter retention period. When other laws or agency rules require retention for a longer period of time, the longer retention period shall apply.
- (10) Conviction of a crime related to the practice of the profession or conviction of a felony, whether or not related to the practice of the profession.
- (11) Failing to report to the office a conviction of any felony or any offense related to the practice of the profession in a Vermont district court, a Vermont superior court, a federal court, or a court outside Vermont within 30 days.
- (12) Exercising undue influence on or taking improper advantage of a person using professional services, or promoting the sale of services or goods in a manner which exploits a person for the financial gain of the practitioner or a third party.
- (13) Performing treatments or providing services which the licensee is not qualified to perform or which are beyond the scope of the licensee's education, training, capabilities, experience, or scope of practice.
- (14) Failing to report to the office within 30 days a change of name or address.
- (15) Failing to exercise independent professional judgment in the performance of licensed activities when that judgment is necessary to avoid action repugnant to the obligations of the profession.

How and where to File a Complaint about Unprofessional Conduct

Complaints can be filed online with the **Vermont** Secretary of State's Office of Professional Regulation.

The complaint form can be found online at: <http://vtprofessionals.org/opr1/psychologists/>

Complaints can be filed online with the **California** Board of Behavioral Science. The complaint form can be found online at:

https://www.bbs.ca.gov/consumers/consumer_complaints.html

Complaints can be filed online with the **New York** State Education Department. The complaint form can be found online at:

<https://www.op.nysed.gov/enforcement/discipline-complaint-form>

Our Mutual Responsibility to Minimize Exposure to Illness

We both understand that by meeting in person we are assuming the risk of exposure to the coronavirus or other infectious diseases. I have taken steps to reduce the risk of spreading disease within the office such as running a medical grade air filter, keeping appropriate distance, and keeping surfaces clean. Please let me know if you have questions about these efforts. To be able to meet in person, we both agree to take certain precautions which will help keep everyone (you, me, and our families, and others) safer from exposure to illness.

- We will only keep your in-person appointment if we have been fever-free for a minimum of 24 hours prior to our meeting (as recommended by the CDC).
- If we have any symptoms of the coronavirus or any contagious illness, we agree to reschedule our appointment OR proceed using telehealth if we feel well enough to meet.
- We will adhere to the safe distancing precautions and masking in the office as we deem necessary through discussion as concerns arise (such as disease exposure with no symptoms).
- We will discuss any concerns regarding illness exposure before or during session so that we both feel safe.

I may change the above precautions if additional local, state, or federal orders or guidelines are published. If that happens, we will talk about any necessary changes. If other public health risks mean that meeting in person is not recommended, we will continue meeting by telehealth.

Professional Qualifications and Experiences

I am a Licensed as a professional mental health counselor in Vermont, New York and California (VT #068.0134164, NY #015762, CA #LPCC 20356). I received my Masters of Arts in Counseling Psychology from Pacifica Graduate Institute in Carpinteria, CA in 2017. I completed a two-year part-time traineeship and one-year part-time internship as a school-based clinician in the Ojai Unified School District in Ojai, CA, a one-year part time traineeship in the Ventura Unified School District in Ventura, CA, and a one-year full-time internship at Maple Counseling Center in Ventura, CA in private practice. I completed my pre-licensure clinical hours in private practice at Full Circle Health and Wellness, LLC in Montpelier, VT under the supervision of Dr. Tracy Loysen, PhD. I have worked with groups, individuals, couples, families, children, adolescents, and adults. I have experience treating depression, anxiety, domestic violence, substance use, addiction, codependency, trauma, grief and loss, ADHD/ADD, relational issues, personality disorders, LGBTQIA issues, existential issues, identity issues, eating disorders, cultural issues, Dissociative Identity Disorder, issues around creativity, purpose, and difficult life transitions. I am EMDR certified and am currently in a training program to become a Jungian Analyst.