

INFORMED CONSENT FOR PSYCHO-EDUCATIONAL TESTING

Please read this document carefully in its entirety and ask any questions you have about the content. When you sign this document, it will represent an agreement between us.

CREDENTIALS: I hold a master's degree in Education With Emphasis in Counseling and Guidance and I am Licensed as an Educational Psychologist by the California Board of Behavioral Sciences (License #3558)

PRACTICE STRUCTURE: I am in independent practice and am not affiliated with any other individual or practice. My professional records are securely maintained and can only be shared or accessed with your specific written permission.

WHAT IS PSYCHO-EDUCATIONAL TESTING? Psycho-educational evaluation is a process that includes a combination of clinical interviews, completion of written questionnaires, and use of a variety of standardized measures in two or more appointments. Depending upon the individual concerns and questions to be answered by the evaluation, testing may include measures of:

- Intellectual Development
- Academic Achievement and Learning Progress
- Attention, Executive Functioning, and Memory
- Visual and Auditory Information Processing
- Phonological Processing
- Visual-Motor Coordination, Fine-Motor and Visual Perceptual Abilities
- Behavioral and Social/Emotional Functioning
- Adaptive Behaviors

WHAT IS THE PROCESS? Prior to the assessment, please complete intake paperwork that has been shared with you. All comprehensive assessments include a 30-minute pre-consultation/information gathering meeting, a one hour-90 minute information meeting to review assessment results (following the completion of all assessments) and a comprehensive assessment report. The in-person psycho-educational assessment is typically completed over 2 to 3 appointments of 3 hour sessions (6-10 hours total) with an additional feedback session (1-2 hours) completed in person or via video conference to review the results and recommendations. Testing also involves scoring all protocols and rating scales, interpretation of the assessment

results and the preparation of a written report. The writing of the report usually takes at least as many hours as and sometimes even more hours to complete than the testing time itself.

USE OF THE EVALUATION REPORT: After the written report has been prepared and shared with you, paper copy or digital copy of the report through encrypted email, the usual next step is for you to share the report with other involved professionals including but not limited to the school team, the pediatrician and other medical professionals. On many occasions, parents set up a meeting at the school to go over the recommendations and determine if additional support can be put in place for your child in the school environment. The recommendations will be practical, driven by the test data and relevant to the needs of your child in the context of the evaluation results.

EDUCATIONAL SUPPORT: I am available to consult with school staff and personnel to help them interpret and understand assessment results so they can implement appropriate interventions and accommodations. I also build capacity among school staff and personnel to address behavioral challenges such as defiance and aggression. Developing a strong connection between home and school is always the goal. The cost for me to consult with school staff and/or personnel is \$100/hour.

IN SCHOOL ADVOCACY: I have extensive knowledge of California's education code and laws specifically as they pertain to special education. I attend IEP (Individualized Education Plan) and 504 meetings and serve as an advocate on behalf of students and families. I strive to help families obtain the maximum educational benefit for their child. The cost for me to attend an IEP or Section 504 meeting as an advocate for you and/or your child is \$100/hour.

LIMITATIONS OF TESTING: Please be aware that it is not in my control whether the school will agree to implement the recommendations and put school accommodations in place.

FEES AND PAYMENT: Fees for assessment are based on the specific referral question(s) and the overall complexity of the assessment. Comprehensive psycho-educational evaluations typically range from \$2000 to \$3000. A \$200 non-refundable deposit is required at the time the first assessment appointment is scheduled. The remaining fees will be split between a ½ installment on the first day of testing and the remainder at the feedback session ((approximately two weeks from the last date of assessment). A complete psycho-educational evaluation involves the initial appointment, preceded by scoring and interpretation of written questionnaire measures, followed by face-to-face testing measures with the examiner, usually over two to three appointments. Additional consultations or follow up will be billed at an hourly fee of \$150/hour.

Total cost of psychological assessment and fee schedule can be found on the Assessment Plan Agreement Form.

NO SURPRISES ACT: In January of 2022, Congress passed the “No Surprises Act,” which ensures that clients do not receive unexpected or surprise bills at the end of service. This is why at Reach For The Stars Counseling, we have always provided up-front fees. However, there might be instances where the first agreed upon fee could change when a client or guardian requests greater services than first quoted. If this happens, you will be notified in advance and a new agreement will be provided to you in writing. We believe in up-front fees and no surprises because this is a respectful way of working with people.

INSURANCE INFORMATION: I am an out-of-network provider. This means that I am not a member of an insurance provider network for any managed care plans. Your insurance plan may or may not cover visits to an out-of-network provider. You are responsible for payment of all charges, submission of bills to your insurance company, obtaining information about your coverage and making certain that we are both aware of any authorization requirements for psycho-educational testing. I will provide you with a Statement for Reimbursement/Superbill should you choose to submit this to your insurance company for reimbursement. Many insurance plans cover psychological/psycho-educational services, and many require the member to make a telephone call before an initial appointment. If you are interested in submitting for reimbursement, I recommend that you contact your insurance company to request information about out-of-network benefits for psychological consultation and testing prior to the first appointment. If you call your insurance company, let them know that you are calling for “preauthorization for psychological testing.” They may ask you for CPT Codes. These are listed below:

96130, Psychological Testing, first hour

96131, Psychological Testing, each additional hour

If your insurance company authorizes the testing, they will use the date they receive the forms for the start date of the authorization. I am not in control of how quickly they will process this request or whether they will authorize testing at all. I will fill out forms if you provide them for me and will give you a copy of forms that I submit so that you can follow up with them directly.

CANCELLATION POLICY: If you must cancel an appointment, please give a minimum of 24 hours advance notice. If this minimum is not provided, you will be charged a cancellation fee of \$100 for the initial appointment, family feedback meeting and/or for the cancellation of a testing appointment. The best way to reach me is by calling my confidential voicemail number (760) 209-5655 or emailing me at marie@reachforthestarscounseling.com

CONFIDENTIALITY: All information disclosed during assessment sessions is confidential and may not be revealed to anyone without the client or guardian's written permission (release of information form) except where disclosure is mandated or allowed by law. Such situations include the following:

- The evaluator believes that a client may be a danger to themselves, another, or another's property and that disclosure is necessary to prevent the danger. In the case of danger to another, the psychologist is required to notify the police and take reasonable steps to warn the intended victim.
- There is a reasonable suspicion of actual or potential child abuse (emotional, physical, sexual) or neglect involving the client, or someone known by the client.
- There is a reasonable suspicion of neglect or abuse of a dependent adult or elderly person.
- A client is "gravely disabled" (i.e., is unable to take care of basic needs such as feeding, self-grooming, getting home safely).
- A valid court order (legal subpoena) is issued for a client's files.
- Client's Bill of Rights
- Request and receive full information about the psychologist's professional capabilities, including licensure, education, training, experience, professional association membership, specialization, and limitations.
- Have written information about fees, method of payment, insurance reimbursement, number of sessions, substitutions (in cases of vacation and emergencies), and cancellation policies before beginning the psycho-educational assessments.
- Receive psycho-educational assessments and a report that will be helpful to you.
- A safe environment, free from sexual, physical, and emotional abuse and respectful treatment by the Educational Psychologist
- Culturally and linguistically appropriate assessments completed.
- Ask questions about the assessments
- Refuse to answer any questions or disclose any information you choose not to reveal.
- Request that the Educational Psychologist inform you of your progress.
- Know the limitations of confidentiality and the circumstances in which a therapist is legally required to disclose information to others.
- Know if there are supervisors, consultants, students, or others with whom your Educational Psychologist will discuss your case.
- Right to Withdraw: Refuse a particular type of assessment or end assessments without obligation or harassment at any time.
- Refuse electronic recording (but you may request it if you wish).
- Request and receive a summary of your file, including the diagnosis and type of assessments.

CONTACT: The best way to contact me is through the confidential voicemail (760) 209-5655 or by emailing me at marie@reachforthestarscounseling.com. Please be aware that I do not answer calls when I am in appointments, but I check voicemail often. I will make every effort to return your call within 24-48 hours, except for weekends and holidays.

If you are facing a psychological or medical emergency, please call 911.

AGREEMENT OF INFORMED CONSENT: Your signature below indicates that you have read the information in this consent form and agree to abide by its terms during our professional relationship. By your signature below, you indicate that:

- You have been informed of and understand the type of services to be provided.
- You have been informed of the limits of confidentiality.
- You understand and agree to the payment and cancellation policies.
- You accept full responsibility for all fees incurred in completing the psycho-educational evaluation as spelled out in the Assessment Plan Agreement Form.
- You understand that, if you are provided with a digital copy of the report, you are not permitted to make any changes to the report.

You understand that you may request a psycho-educational assessment be completed by your local school district for free, if you choose to do so.

Name of individual receiving psychological assessment

Signature

Date

Parent/Guardian Name (if individual is under 18)

Signature

Date
