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OFFICE INFORMATION

Benefits and Risks

Psychotherapy and / or psychopharmacology has both benefits and risks. Treatment is based on the needs of the particular individual or family. I encourage you to discuss your treatment plan and progress with me at anytime. Treatment is a cooperative effort that involves open and honest communication between client and therapist. Benefits of treatment may include personal growth; family and/or relationship enhancement; and improvements in mood, behavior, thinking, and work or academic functioning. Risks sometimes include, but are not limited to worsening of mood, behavior and/or family functioning. Difficult feelings and issues may need to be experienced and addressed. Medications may need to be adjusted. Adjunctive treatments or programs may be recommended. If you should decide to terminate treatment at any point in the therapy or assessment process I will be glad to help facilitate a referral somewhere else.

Confidentiality

Issues discussed during the course of individual treatment are completely confidential by law. I protect vigorously the confidentiality of any information from you. Exceptions to confidentiality are legally required in cases of potential harm to oneself or others, child or elder neglect or abuse, and in cases where a court subpoena may require the release of confidential material. I urge you **not** to sign a blanket release of information without first discussing it with me. Some insurance companies require treatment plans or clinical information before they will pay for treatment. You have a right to pay for your treatment yourself if you do not want any clinical information released to insurance companies. I make every effort possible to release only generic information to your insurance companies avoiding personal details as much as possible. If anyone communicates information regarding you to me I will inform you of the communication at our next meeting unless the information I have received is otherwise protected by confidentiality laws.

Contacting Dr. Thomas

I am not usually immediately available by telephone. While in session, I do not return phone calls. I make every effort to return calls on the same day with the exception of holidays and weekends. Please leave time frames when you are most likely to be available and I will do my best to return your call then. If your call is urgent, please specify this to the office assistant or on the voicemail system. My office assistant or answering service can page me with a short written message. If you have a privacy block please temporarily remove it so I may return your call. Privacy block may significantly delay a return call. I can also be contacted for brief communications regarding non-emergent situations by email (address above). **NEVER USE EMAIL FOR URGENT OR EMERGENT SITUATIONS!** If your Email is lengthy I may not have the opportunity to read it until we meet. If your Email is lengthy start your message with a brief statement regarding what you need a response to. I also recommend that you do not use your whole name or other easily identifiable information in your email in order to protect your confidentiality. If I cannot determine whom the email is from I will respond requesting that you give me further information. Remember that sending email is similar to mailing an UNSEALED letter. You may also contact my Office Assistant by phone at the number above to set up a 20-30 minute appointment to meet with me. Longer appointments such as diagnostic evaluations or 45-50 minute psychotherapy appointments need to be scheduled with me.

Emergencies

If a mental health-related emergency occurs, go to an emergency room, as you would do with any other health emergency. Someone will evaluate the person in crisis at the emergency room, who will then decide on an appropriate course of action. Please request the emergency room staff to notify me. If you will be using

insurance, it may be advisable to contact your insurance company to ask which hospitals are covered by your plan. NEVER USE EMAIL FOR URGENT OR EMERGENT SITUATIONS!

Cancellations or Missed Appointments

I kindly request the courtesy of 24-hours notice if you need to cancel an appointment. Your appointment time is specifically reserved for you and is not readily reassigned to others. Cancellations less than 24 hours and missed appointments may be charged Full Fee. Insurance companies will not reimburse you for these charges.

Billing Policies

Unless I have a contract with your insurance coverage that requires a different arrangement, Full Payment for your first appointment is required at the time of the first appointment. This will be applied to your deductible, payments or co-payments that are due subsequently. Further payments or co-payments are due at the time of service. You will not be charged for brief phone contacts of five (5) minutes or less or for brief contacts with other support services on your behalf such as schools or other treatment providers, etc. Longer phone conversations, travel time, letter writing, and report preparations are billed on a prorated basis. Higher legal fees are charged if my participation is required in legal proceedings. A copy of my current fee schedule is attached to the end of this document.

My office will bill your insurance company directly if you provide us with all the necessary insurance information. You remain responsible for the cost of services and for assuring that insurance reimbursements are timely and accurate. Please keep my office informed of any changes in your insurance.

Payments for evaluations, personal payments or co-payments are expected at the time of service. My office provides assistance in facilitating your receipt of insurance benefits to which you are entitled. We file insurance claims promptly and provide timely treatment plans as may be required. It is important for you to determine exactly what your insurance benefits for mental health treatment are so treatment can be planned accordingly.

Insurance companies require you to authorize me to provide a clinical diagnosis. Additional information such as periodic treatment plans or treatment summaries may be required. This information will become part of the insurance company files. All insurance companies claim to keep such information confidential, but once it is in their possession I have no control over what they do with it. If you request I will provide you with a copy of any report I submit.

A collection agency may be used for delinquent accounts.

Please do not hesitate to speak with me if you have any questions or concerns about these policies or your treatment.

Your signature ON THE PATIENT REGISTRATION FORM indicates your understanding and acceptance of these policies. Please retain this for your records.

Thank you!

As of January 1, 2009, Dr. Thomas' fees for professional services are as follows:

90801	Outpatient Diagnostic -	\$310 for 75 to 90 minutes
90801	Limited Outpatient Diagnostic -	\$210 for 50 to 60 minutes
90807	Outpatient Psychotherapy	\$190 for 45 to 50 minutes
90862	Outpatient Psychopharmacology	\$135 for 20-30 minutes
90862	Brief Outpatient Psychopharmacology	\$75 for 10-15 minutes
90805	Outpatient Psychotherapy	\$135 for 20-30 minutes
	Legal Deposition or Testimony	\$450 per hour (\$45 / 0.1 hours)
	Legal Consultation	\$300 per hour (\$30 / 0.1 hours)
	Psychiatric Telephone Consultation	\$3.50 Per minute
	Indirect Medical Services (school consultation, disability forms, etc)	\$4.00 Per minute

These fees may be changed at any time. Verbal and or mailed notification of fee changes will occur at least 2 weeks before any changes take effect.