



MISOPHONIA CONSULTATION AGREEMENT

THE CONSULTING PROCESS

Since you do not reside in Minnesota and my license as a Marriage and Family Therapist is regulated by the state of Minnesota, I am not able to serve in the role of psychotherapist for you. The below describes what I am able to provide for misophonia support and will need you to agree to if we move forward with working together.

The consultation process is short-term. There is no “quick fix” for misophonia and therefore at the end of our work together I will provide you with personalized short and long-term goals for misophonia management, which you will ideally continue to work on with the support of a local and long-term therapist. These goals will be things a much wider population of professionals know how to support.

As a consultant, **I CAN** provide you with:

- Information about misophonia. There are many confusing aspects of misophonia which I can help clarify.
- Strategies for managing and getting to a better place with misophonia (including Somatic Experiencing techniques*).
- A safe space for you to talk about the difficult emotions and concerns you have regarding misophonia.
- Guided conversations between partners or other key relationships to promote a shared understanding and management plan.
- Tips for advocating for oneself at work or school.
- Lived experience and understanding as a person with misophonia and parent of a child with sound sensitivity.
- A list of personalized suggestions for continued greater misophonia management beyond our time together (4 or more sessions must be conducted and purchased to receive this).
- A 15-minute phone or video call with your long-term therapist in which I go over the management plan and answer any questions (minimum of 4 sessions must be purchased to receive this and your therapist must take the lead on scheduling the call). This does not have to take place during the course of our work together but ideally happens within 6 months of concluding our work together.

As a consultant, **I CANNOT**:

- Provide you with a mental health diagnosis, since doing so would require me to be serving in the capacity of a mental health professional. I will however suggest psychological testing when I see potential unidentified areas of concern. Note: Currently misophonia is not an official diagnosis.
- Bill your insurance or provide you with a Superbill that has a CPT code to submit for out-of-pocket benefits.
- Guarantee the same legal rights to privacy that is granted to psychotherapy clients by law (should records be subpoenaed, for example) but I will do my best to protect your privacy.

*Somatic Experiencing (SE) is a method for releasing trauma and stress from the body. I use SE to help clients learn how to settle and release physiological activation from the body (i.e. completing the stress response cycle) so they can have more control over their nervous system versus being controlled by it.

I welcome clients of all races, ethnicities, gender affiliations, sexual orientations, socioeconomic statuses and religious beliefs. I work with adults only. You are encouraged to discuss any concerns, complaints or questions you have with me. I am not the right support person for everyone. You are welcome to decide after our first session if you would like to continue working together and to discontinue our sessions at any time.

APPOINTMENTS AND CANCELLATIONS

Sessions are 50 minutes in length and take place via video conferencing. You will receive an email with the link for joining prior to the session. Meeting weekly or bimonthly tends to work best, but sessions can be spread out further if preferred.

Clients can sign up to get appointment reminders that come via email or text. If you need to cancel an appointment for any reason, it is necessary to do so 24 hours in advance via phone call (leave a voice message), text (763-458-2654) or email (sara@authenticlivingts.com). Cancellations with less than 24-hour notice or "No Shows" will automatically be charged 50% of the session fee. This is necessary because a time commitment is made to you and is held exclusively for you. If you are late for a session, you may lose some of that session time.

FEES

I use the HIPPA-compliant platform, SimplePractice, for scheduling, paperwork and billing. Each client has their own "portal" where they can view invoices/statements, request appointment times and fill out paperwork. In order to receive consultation services, you must have a credit card on file in your portal. I will run your card for the first session upon scheduling it.

50-Minute Session: \$200 for the first session, \$175 per session thereafter

I have a limited number of slots available for clients who are experiencing financial hardship. This must be requested and agreed upon prior to scheduling one's first session or any future sessions (if the hardship occurs after we have started working together).

If you require my assistance during a legal proceeding or for legal issues my hourly fee is \$500/hour.

LEGAL/ETHICAL GUIDELINES

Both the fact and content of our sessions is confidential and will not be released to a third party without written consent from you, except where required or permitted by law. Exceptions to confidentiality (by law) include: certain court matters; potential danger to self or others; and suspected child, elder or dependent-adult abuse.

COMMUNICATION OUTSIDE OF SESSIONS

If you need to contact me between sessions, you can email me or leave a message on my voice mail. I am often not immediately available; however, I will attempt to return any messages within 24 business hours. If a true emergency situation arises, please call 911. As you are aware, electronic communications cannot be guaranteed to be 100% secure. Therefore, I will engage in brief email communications for scheduling or for other specific reasons, but I do not participate in lengthy electronic conversations.

CELL PHONES

Please refrain from using cell phones during sessions. Please note that audio or video recording of sessions is not permitted.

BY CLICKING ON THE CHECKBOX BELOW, YOU ARE STATING:

- I HAVE READ, UNDERSTOOD AND ACCEPT THE GUIDELINES AND POLICIES CONTAINED IN THIS DOCUMENT.
- I UNDERSTAND THE FEES AND AGREE I AM RESPONSIBLE FOR PAYMENT. I UNDERSTAND INSURANCE DOES NOT REIMBURSE FOR THESE SERVICES.
- I AGREE TO AUTHENTIC LIVING, LLC STORING MY CREDIT CARD INFORMATION IN A SECURE AND HIPAA-COMPLIANT DATABASE TO MORE CONVENIENTLY BILL FOR SESSION FEES AND LATE CANCELLATION FEES.
- I HEREBY CONSENT TO CONSULTING UNDER THE ABOVE STATED CONDITIONS.

If/when you are added as a client, you will be sent this form electronically for signing.