

Marti Hickey, LICSW
753 N. 35th Street, Suite 101
Seattle, Washington 98103
marti.hickeylicsw@gmail.com
martihickeycounseling.com
206.565.1332

Disclosure Statement

The State of Washington requires licensed therapists to disclose the following information to potential clients as we prepare to enter into a professional therapeutic relationship. Please read this form carefully, print and bring it to our first session together. Once we have talked about it and you have had any questions answered, we will sign it and we will both keep a copy.

Your rights as a client in counseling: You have the right to choose a therapist and treatment approach that best suits your needs. You also have the right to refuse treatment or end services at any time. Together, we will decide upon a treatment plan which may involve practice work outside of our sessions. Please let me know if you have any questions, concerns or feedback during the course of our work together.

My professional background: I received a Master of Social Work degree from the University of Washington in 1998. Since then, I have worked steadily in social services with a focus on adults and families affected by abuse, substance abuse and trauma. Additional areas of concentration have included work with veterans, cancer survivors, and parenting plan evaluation (custody evaluation).

Therapeutic orientation: I am a Licensed Independent Social Worker in the State of Washington; my license number with the State of Washington Department of Health is LW00008006. Together, we will use the relationship that we create to safely explore those issues that caused you to reach out at this time. We will work collaboratively to identify patterns that get in the way of living the life you'd like to have. I have extensive training in Cognitive Behavioral Therapy, Cognitive Processing Therapy for trauma, Relapse Prevention treatment for substance abuse and Motivational Interviewing. Additionally, I will incorporate elements of psychoeducation, mindfulness and psychodynamic therapy.

Areas of Practice: I currently treat adults individually for anxiety and depression, grief and loss, transitions and change, self-esteem, family of origin issues and trauma and abuse.

Confidentiality: Under most circumstances our sessions are completely confidential. In those cases in which we decide I should talk with another provider about you (for example, your physician or psychiatrist), you will need to sign a release of information form to authorize that contact. However, Washington State law requires that confidential information be released under the following circumstances for the purpose of securing your safety or that of others:

- If there is reason to suspect that a child, dependent or elder adult is being abused or neglected (or has been within the past several years)
- If you are considered an imminent danger to yourself, to someone else or are thoroughly unable to take care of your basic, life-sustaining needs
- Under court order, I may be required to disclose information (this is rare and would only occur if you were involved in a court case).

Please refer to the Notice of Privacy Practices for more detailed information about the limits of confidentiality.

If you have a concern about the quality of care you receive, please feel free to discuss this with me directly. However, Washington law requires that I provide you with contact information to file a complaint regarding unprofessional conduct with the Department of Health (360.236.4700):

**Washington State Department of Health, Health Systems Quality Assurance, Complaint Intake,
P.O. Box 47857, Olympia, WA 98504-7857**

Current practice information: My office is located in the Fremont neighborhood at 753 N. 35th Street. Let me know if you have questions about parking or about finding my office. Once you arrive, please have a seat in the waiting area of suite 101 and I will come out for you at the time of our appointment.

Payment: I bill at a rate of \$110 per 50 minute session. I am an in-network provider with Premera, Regence and Molina; I also work with Wellspring and Beacon EAP referred clients. Payment can be made by cash, check, debit or credit card. I collect payments (or insurance copays) on a monthly basis unless you prefer another arrangement. In order for me to bill insurance for your sessions, insurance companies require that you have a diagnosis. I will discuss your diagnosis with you prior to submission to the insurance company.

I am considered an out of network provider with many insurance companies. In such a situation, you would pay me the full fee and then submit for reimbursement to your insurance company. I will furnish you with a receipt showing fees, services, billing codes and diagnoses upon your request which you can then submit to your insurance provider. You are responsible for obtaining and filling out the appropriate paperwork and submitting it to the insurance company but I will be happy to answer any questions you have about this.

If my fees increase in the time that we work together, I will provide you with one month prior notification.

Cancellations: If you are unable to keep an appointment please cancel with at least 24 hours of notice to avoid being charged the full amount for the missed session.

Communication Policy: If you are in crisis and need to speak with someone immediately, please call the King County Crisis Line at 206.461.3222; or call 911 if there is a life-threatening emergency.

If you need to contact me, please leave a phone message at 206.565.1332. I check my voicemail for messages on a regular basis.

Please limit any email contact to scheduling and logistics. If you would like to discuss a personal matter or the content of treatment, we can speak by phone or in person. I do not use text (SMS), chat, or other social media to communicate with clients. These method in their typical form are not confidential means of communication.

My signature below indicates I have read and understand the information in this disclosure statement.

Signature of client

Date

Marti Hickey, LICSW

Date