REQUEST FOR SERVICES

Client Printed Name:_________________________________________

(1) Professional Staff: The Institute for Well Being (IWB) welcomes you. Our services are provided at reduced cost by professional staff, or by graduate and undergraduate students under the direct supervision of our professional staff. All professional staff have the appropriate educational credentials for their disciplines, are licensed by the State of Maryland (if licensure is required for practice), and are certified or credentialed by their professional associations (if required for practice). All staff abide by all state and federal laws and regulations governing the security and confidentiality of medical information and records.

(2) Student Training: The IWB is an important part of training students at Towson University. Your visits may be used for instructional and demonstration purposes. There may be observations by Towson University students or affiliated training programs; confidential use of audio and video tape recording; and/or confidential use of client records in accordance with applicable law. These observations and recordings are not used for publicity purposes. Our students are taught to abide by all state and federal laws and regulations governing the security and confidentiality of all types of client records and sign an agreement that they will follow these policies.

(3) Faculty Research: The IWB is an important clinical setting for faculty research. All IWB research projects are approved by the Towson University Institutional Review Board (IRB). Client medical records are protected by the Health Insurance Portability and Accountability Act (HIPAA) and its implementing regulations. If client records are reviewed for research purposes, client names and identifying information will be omitted. If any specific research project involving your direct participation is contemplated, you will be given separate information and permission forms for the project.

(4) Responsibility for Fees: Each client is responsible for Institute for Well Being service fees. If fees are covered by medical insurance, it is the client’s responsibility to obtain any necessary referrals, pre-authorization, or special forms for insurance billing. Insurance membership cards must be presented at time of the first appointment. If your insurance is billed for service and the insurance company denies payment, you are responsible for payment. Any balance due for Institute for Well Being services must be paid by the client prior to continuation of services.

(5) Notice of Privacy Practices (HIPAA): We follow federal guidelines related to the privacy of medical information. Those policies are posted on our web site http://www.towson.edu/iwb/hipaa.html, are posted at the IWB, and are available on request from our Second Floor Business Office.

By signing below, I agree to use the services of the Towson University IWB and I understand and agree to the above information.

Client Signature (I am age 18 or older and do not have a legal guardian) __________________________ Date ______________

Parent/Guardian Signature (if Client cannot sign) __________________________ Date ______________

Institute for Well Being Witness/Staff Signature __________________________ Date ______________

(Rev 7/27/16)