

PROFESSIONAL DISCLOSURE

Debra J. Breazzano, MA, LPC
Black Forest Counseling
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Professional Services Agreement

Dear Potential/New Client:

The following information is intended to help explain some of the details of our working relationship. It is essential to choose a therapist whom you trust is right for you. Please read this agreement, visit my website, and feel free to ask questions. **I offer a free 30-minute consultation. We can meet in person or virtually.**

MY BACKGROUND: I hold a Masters degree in Psychology from Regis University, Denver and licensed by the State of Colorado as a Professional Counselor (license # 3865). I have over 30 years of counseling experience with adults, teens, couples, families and groups. In addition, I am an educator and have taught for many years at the high school and university levels. I offer professional, as well as personal development seminars and have worked with the Outward Bound Schools in both Colorado and Costa Rica designing and implementing eco psychology programs based on outdoor challenges. **Please visit my website to learn more about my education, experience, and other background information.**

My Specialty Areas:

- Relationship/Marriage and Family Counseling
- Anxiety and Depression
- Self Harm and Suicidal Ideation
- Post Traumatic Stress (PTSD)
- Addiction Recovery
- Grief and Loss
- Dream Work
- Self Actualization
- Life Transitions and Rites of Passage
- LGBTQIA+
- Ecopsychology Experiences
- College and Career Planning
- Mental Health and Personal Development Workshops
- Supervision of Counselors Seeking Licensure with Colorado

METHODS OF THERAPY: I work with a client-centered, integrative approach with focus on the connection between mind, body, spirit, and emotions. I am experienced with a variety of therapeutic methods, and what feels the most comfortable and empowering for you will be the techniques we work with. I enjoy facilitating Mindfulness, Cognitive Behavioral and Dialectical Therapy, Trauma Therapy, Solution-Focused Therapy, Therapeutic Breathwork, Gestalt Therapy, Jungian/Analytical therapy, NLP, Hypnotherapy, Self-Generated Ritual and Ecopsychology as approaches for healing, resolution and self-actualization. Learn more about these therapeutic methods on my website. **Note: If you cannot meet in person, then we can meet virtually.**

FEES: The initial 30-minute consultation is free. An individual session is typically 60 minutes in length, for \$120. A 30-minute session is \$65. Working with couples or families the sessions tend to be 90 minutes in length, for \$175. If you are in financial need, up to a 20% discount is offered on fees. There is no charge for unscheduled communications of 10 minutes; longer communications will be billed at session rate. Group, Presentation and Workshop fees will be negotiated under contract.

PAYMENT FOR SERVICES: Private Pay. You are responsible for payment of the full fee at the time of the session. However, upon your request, I will give you a bill/payment invoice with a diagnostic code to submit to your insurance company for any reimbursement they may offer. Check with your insurance company to determine your out of network coverage. Payment options: Venmo, Zelle, Check or Cash.

CANCELLATIONS, RESCHEDULES, OR MISSED APPOINTMENTS: Cancellations or reschedules should be at least 24 hours in advance or you may be responsible for paying for your full scheduled time. You can leave a message on my cell: 719 440-4957 or Email: debra.breazzano@gmail.com.

EMERGENCIES: If you are in crisis when I am unavailable, please call the Colorado Crisis Center at 1-844-493-8255 or text "TALK" to 38255. You will be connected to a mental health professional or peer specialist (an option for teens). 24/7 availability.

CONFIDENTIALITY: All information discussed during sessions will remain confidential except in cases of imminent danger, for information requested by your insurance company, for criminal proceedings, or for collecting fees when in default of payment. A release form must be signed by you before information can be given to anyone else who you specify.

GRIEVANCES: My practice is regulated by the Department of Regulatory Agencies. Grievances about any therapists should be reported to the Department of Regulatory Agencies, State Grievance Board, 1560 Broadway, Suite #1340, Denver, Colorado 80202; (303) 894-7766. As the law states and I agree, sexual intimacy is never appropriate between client and therapist and should be reported to the grievance board.

CONCLUSION OF THERAPY: When you sense you are ready to complete therapy it is important to have a final session. Completion of relationships is an important part of the growth process and to do this consciously, with clear intention, keeps the process healthy.

I have read the above information and understand my rights as a client. I agree to the terms as stated above or as modified in writing.

(Client/guardian signature)

(Date)

EMAIL/ADDRESS: _____

Date of Birth: _____

Phone/s:

(home) _____

Hourly Fee for Services: _____

(cell) _____

(work) _____