

Consent for Brief Supportive Psychotherapy

At Meridian Advanced Psychiatry (MAP), we are dedicated to providing high-quality mental health services. Please take a moment to review and understand the following information.

Our Services:

1. Psychiatric Services:

- Our primary focus is on psychiatric care.
- Our providers will diagnose, assess, prescribe, and monitor medications to address your mental health needs effectively.

2. Brief Supportive Psychotherapy: In addition to medication management, we offer brief supportive psychotherapy.

- Our providers engage in supportive conversations with you and your family during your appointments.
- This therapy aims to provide emotional support, encouragement, and validation. It is typically completed seamlessly within your medication management appointment.
- If your provider feels that you would benefit from additional or more intensive psychotherapy, they will discuss referral options for this service with you.
- At MAP, we find that offering both these services inside a single appointment provides maximum benefit for you as a patient and valuable context for your provider on your mental health without reducing you to simply taking medications.

Additional Charges

- Depending on the duration and complexity of time spent in brief supportive psychotherapy and our contractual agreements with your health insurance provider, there may be separate charges.
- These services are typically separated at the time of billing, with one billing code used for evaluation and management services and another for brief supportive psychotherapy.

Your Consent

By continuing with your appointments at MAP, you acknowledge the following:

- Psychiatric care, including medication management, is the primary service.
- Brief supportive psychotherapy will be provided when your provider deems it clinically appropriate.
- You understand that separate charges may apply for therapy sessions.

If you have any questions or concerns, feel free to discuss them with your provider. We are committed to supporting your mental well-being!

My signature acknowledges that I understand MAP's Brief Supportive Psychotherapy Services and Charges.

Patient Signature

Date