

## **Aurora Psychiatric Associates**

120 Greenwich Avenue, 3rd Floor Greenwich, CT 06830

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Phone: 937-604-2939

[aurorapsychiatric.com](http://aurorapsychiatric.com)

### **Our providers:**

Nathalie Szilagyi, MD

Jillian Celentano, LMSW

### **Our administrator and scheduling wizard:**

Peggy Paulo

### **Welcome to our practice!**

We provide psychiatric healthcare services for children, adolescents and adults, both in person and via telemedicine, as appropriate. These services may include psychotherapy, medication therapy, laboratory tests, and other appropriate medical and psychiatric interventions. We are committed to providing excellent, personalized patient care and maintaining strong relationships with our patients and their families.

## **Office Policies**

It is important that we establish a clear understanding of our financial and privacy policies to avoid any confusion. The patient, and the party responsible for payment if that differs, should read this carefully and sign at the bottom. In addition, you will be provided with a separate Notice of Privacy Practices, which you should likewise read carefully and sign. If you have any questions about our fees, policies, your financial responsibility or our privacy practices, please do not hesitate to ask.

### **Insurance:**

We do not participate with any insurance plans and therefore are considered out of network providers. We ask for payment in full at the time of service and we will provide you with a receipt that you can submit to your insurance company for any reimbursement.

Reimbursement is determined by your insurance policy and influenced by many factors, including deductibles and out-of-network benefits. For example, coverage for tele-psychiatry services varies widely and many carriers do not reimburse for telephone calls at all. If you have questions regarding your reimbursement, please contact your insurance carrier.

We ask you for copy of your insurance card to submit with any labs ordered by our office. If there is a preferred in-network lab for your insurance company, please let us know. Please notify our office of any changes in contact information or insurance coverage (for lab and other testing purposes).

### **Billing and Payment Policies:**

All fees are billed and due at the time of service. We prefer payment by credit card, but also accept cash or personal check. We kindly request that you leave a credit card on file with our office, to which we will charge outstanding visit fees and other charges as noted above. We will not schedule appointments or refill medications for patients for whom there is a significant, longstanding balance due.

## **Types of Treatment:**

### **Initial Consultative Evaluation** - for new patients

New patients in our practice are invited to participate in an initial consultative evaluation with the psychiatrist, Dr. Szilagy, or the therapist, Ms. Celentano. The consultative evaluation does not imply that you or your child are entering into a doctor-patient relationship or therapist-patient relationship with the consulting provider. Following the consultative evaluation, the physician or therapist will review with you/your child the diagnostic impressions and treatment options. These options may or may not include care and treatment with the consulting psychiatrist or therapist. If the consulting clinician determines that our practice cannot meet a potential patient's needs, she will provide referrals to another provider or program for recommended treatment. In general, when treatment is initiated with a physician or therapist following the consultative evaluation, visits typically are frequent at the start of treatment and then become less frequent as patients' conditions improve.

-Consultative evaluations typically involve 3-4 visits, billed at usual hourly rates.

### **Ongoing Psychiatric Treatment** - for established patients

For established patients in our practice, our psychiatrist, Dr. Szilagy, may provide psychotherapy, treatment with medication, or a combination of both, as appropriate.

Ms. Celentano, our therapist, is a licensed social worker who can provide individual or group psychotherapy. Both clinicians can also provide family therapy as appropriate.

As families play such an important role in the mental health and well-being of children, adolescents, and young adults, we strive to maintain close connections with parents/guardians, while appropriately respecting patient confidentiality, and we encourage family engagement in care whenever possible.

Follow-up appointments for established patients, whether in person or via telemedicine, are typically booked for 60 minutes' duration with Dr. Szilagyi and 50 minutes' duration with Ms. Celentano. However, shorter visits of 30 minutes' duration may be recommended at times, at the discretion of the treating clinician.

Appointment fees for ongoing office visits are based on the length of time booked. Tele-psychiatry or phone sessions will be charged at the same rate as face-to-face visits. At the physician's discretion, fees may be adjusted or waived as deemed appropriate.

### **Scheduling and Cancellation:**

We schedule appointments carefully and for a length of time that we anticipate will be appropriate. We pledge to be as timely as possible, recognizing that we may be faced with unanticipated emergencies. Because your appointment time is reserved solely for you, 24 hour notice of cancellation is required to avoid a missed appointment fee, which is based on the length of your scheduled appointment.

### **Additional Services:**

We understand that quality psychiatric care often extends beyond therapy sessions. When appropriate, clinicians may engage by phone or Zoom with family members,

teachers, primary care physicians or other therapists. When time permits, we may attend relevant school meetings on request. When patients need a higher level of care or other psychiatric services (such as rehabilitation or residential treatment), we may provide additional coordination of care. Additionally, we are happy to complete forms, letters or reports as required by schools, camps, employers or other organizations - though we request a minimum of 7 days' notice prior to the due date for each.

Because these services can require extensive time outside of appointments, we charge for any activities lasting 15 minutes or longer. These are billed on a prorated basis based on each clinician's usual rates.

### **Electronic Prescribing:**

With limited exceptions, all prescriptions must be sent electronically in a secured manner directly to pharmacies. By using a secure prescription system, we are able to maintain accurate records and safely prescribe any necessary medications. Your

### **Communications:**

#### **- Emergencies - VERY IMPORTANT**

If there is the potential for any physical danger to yourself, your child or others, immediately call 911 or go to the closest emergency department. In CT, if you or your child have an urgent but NOT life-threatening crisis, you may call 211 for Mobile Crisis Intervention.

**Please do NOT delay seeking emergency care.**

### **- Non-emergent but Urgent or Time-Sensitive Matters**

You may call our office (at 937-604-2939) and speak with our administrator or leave a message indicating the urgent or time-sensitive nature of the matter. Additionally, your clinician will speak with you about other possible ways to reach them in urgent situations. Your provider will always make an effort to respond in a timely manner.

### **- Routine Communications - including prescription refills**

Our practice invites you to communicate with our clinicians and staff between appointments, including via email. We aim to respond to emails within 1-3 business days, but the often-unpredictable nature of psychiatric practice means that this is not always possible. For this reason, medication refill requests should be made with at least 3 days' advance notice. Patients or families should *call* the office or their provider if a quicker response is needed.

### **Expectations for Adherence to Care**

We are so pleased to provide care for you or your child. Mutual honesty, reliability and respect between all of us - patient, family and clinician - are essential for the development of the therapeutic relationship which is so crucial for the delivery of safe and effective psychiatric care. Clinicians will do our best to communicate our treatment recommendations and plans, and we encourage questions and discussion of options. However, sometimes patients or families disagree with our treatment approaches or recommendations. In such cases, clinicians may determine that the patient's needs could be better addressed in a different treatment setting. If this

occurs, your provider will discuss it with you directly if possible, and you will be notified in writing and generally given 30 days to find alternative care.

Please note that if more than 6 months elapse without an appointment with your clinician, this absence will be interpreted as a withdrawal from care unless you and your clinician have directly discussed this and mutually agreed otherwise.

**Agreement:**

**By signing below, you confirm that:**

- You understand and accept the above;**
- You understand that you can address any questions or concerns with clinicians or staff, and agree to do so as needed.**

**Responsible Party Signature:**\_\_\_\_\_

**Responsible Party Name**\_\_\_\_\_

**Relationship to Patient**\_\_\_\_\_

**Patient Name**\_\_\_\_\_

**Patient Date of Birth**\_\_\_\_\_

**Date**\_\_\_\_\_