

Mary O'Leary Wiley, PhD, ABPP

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Welcome to my office. I am pleased to have the opportunity to work with you. Often, when people begin seeing a psychologist for psychotherapy, they have questions about what to expect, and what is expected of them. This handout is an attempt to describe some common issues and how we can best work together to deal with your concerns. Please keep this handout so you can refer to it in the future.

1. Treatment. Receiving treatment for emotional concerns is different than receiving treatment for

physical concerns. Psychotherapy is a collaborative process between you and your therapist. It can only be as effective as the energy you put into it. You must be totally honest with yourself and your therapist regarding your symptoms, your life history, and your concerns. It is only in this way that your therapist can know what is really going on for you. Unlike physicians, who can examine a patient and hear or see symptoms, a psychologist can only know what you tell him or her. Therapists are not mind readers. It is also important that you participate fully in your treatment by completing all assignments (such as journal keeping or reading assignments) between sessions. Not completing assignments will slow down your recovery--and we both want you to feel better as quickly as you can.

2. Appointment times. Therapy is only effective if you and I meet on a very regular basis. This means that we will choose a 50-minute therapy appointment time once a week. That time will be reserved for you and you alone. Cancellations or missed sessions are very disruptive to good therapy, and you must do everything you can to avoid them. Cancellations must be made at least 24 hours prior to the appointment in order to avoid being charged for the missed session, unless there is a snow emergency or you are very ill. Unfortunately, my schedule is very full, so rescheduling appointments is usually difficult.

2. Waiting Room. When you arrive for your appointment, please have a seat and I will come out for you when it is time for your session. There is a rest room in the inner hallway for your use and. And water and tea is in the hallway.

3. Confidentiality. Information shared with a Psychologist in psychotherapy is confidential, and is privileged communication under Pennsylvania state law. If you wish me to speak with someone, you must sign a release of information form that will permit me to do this. This includes signing a release of information if you wish me to file claims with your insurance company, or if your insurance requires regular information in order to authorize additional sessions. Confidentiality does not apply only in three unusual circumstances: (a) You are, in your therapist's opinion, in imminent danger to yourself or others; (b) A child is, in your therapist's opinion, being abused or neglected; and (c) A court issues a subpoena. Each of these is extremely rare and on occasions when they have occurred in the past, I have always discussed it with my clients in advance.

4. Vacations. I take a one-week vacation each year and attend several professional conferences. I will notify you as soon as I know when these will occur. For the conferences, which are generally brief, I can often reschedule your appointment so that your work is not disrupted. I ask

that you make every attempt to inform me of your vacation plans as soon as you know them.

5. Emergency calls. Depending on the nature of your concerns, you and I will make plans for dealing with emergencies. If your emotional state is such that we anticipate emergencies, we will make plans for between session check-ins. **If a serious emergency arises and you must reach me, please leave a message on my voice mail and call the crisis number for either the Community Crisis Center (942-2141) or the Meadows Crisis Hotline (800-641-7529). These numbers are also on my voice mail tape. You can then talk with the crisis service and they will contact me if you or they believe it is necessary. Please limit emergency calls to serious emergencies. On an occasion I will give clients my cell phone number for emergencies. Please limit cell phone calls to very serious emergencies.**

6. Medication. Many of my clients do not need psychotropic medication (such as antidepressants or sleeping medication), but many do. I work closely with psychiatrists and general practitioners in the area who can see you and help choose the best medication for you, should this become necessary. You will then continue therapy with me, and meet for medication checks regularly with the psychiatrist or general practitioner.

7. Testing. On occasion, I might suggest that psychological tests would help to speed up our work. These tests can provide me with quick additional information about you. If you agree that this would be a good strategy, we will set up an additional hour or two so that you can complete the instruments. We will then discuss the results during one of our sessions.

8. Insurance Coverage. Every person's insurance policy is different, and I believe that you should personally be familiar with your own benefits. Therefore I encourage you to call your insurance company to ask what your benefits are for outpatient psychotherapy. You are responsible for knowing what the limits are on your benefits, such as number of sessions per year, co-pay, or yearly deductible. If you are in extreme psychological distress and cannot call to verify your benefits, I will phone on your behalf. Please ask me in your first session about any intrusions that your insurance company makes into the treatment process, such as their requirements for treatment plans or a heavy focus on short-term treatment.

I am a preferred provider for many different insurance plans. For these policies, I am required to submit bills directly to them. For others, you will be required to submit your bills. However, remember that you are responsible for payment of your bills, and for knowing your own policy limitations.

9. Fees and Payment. My fee is \$125 a session and \$ 175 for the first session. I ask that clients pay a fee at the time of each session, either the full fee or the co-payment portion if we have verified that the insurance company will cover a percentage. Most people find that coming with their check already made out allows us the full session to talk about your concerns. For people with inadequate insurance coverage or with very difficult financial circumstances, I sometimes work out extended payment plans. Please discuss this with me. In extremely rare circumstances if you do not pay your bills, I use the assistance of a collection agency.

10. Ending Treatment. It is always hard to predict how long successful psychotherapy will take. Some clients chose to come for only five or six sessions, others come for over a year. It depends on two factors. First, what would you like to get out of therapy? Changing longstanding behavior patterns takes longer than changing a reaction to a current stressor, for example. Second, how much improvement is "good enough" for you? Some people prefer simply to get over a crisis, while others are interested in changing the nature of their character, which necessitates longer treatment.

11. Non-discrimination. Dr. Wiley is committed to providing care for clients without regard to gender, religion, age, disability, sexual orientation, or national origin. Her training, experience, and personal values provide a strong foundation in the appreciation and celebration of individual differences.

Whether your concerns include depression, anxiety, grief, family communication, eating disorders, or self-esteem issues, research has shown that psychotherapy is an effective form of treatment. Your active participation in treatment is the most important factor in your recovery. Please don't ever hesitate to ask questions. Good communication is essential to successful psychotherapy. I am very pleased to have the opportunity to work with you.

About Dr. Wiley:

Mary O'Leary Wiley, Ph.D. is a Licensed Psychologist. She received her doctorate from the University of Maryland in 1982, having received her Bachelors degree from Penn State and her Masters degree from the University of Maryland. She served as Staff Psychologist at Ithaca College in New York from 1982-1985 and was appointed Director of Psychological Services there from 1985-88. Dr. Wiley then moved to the Washington, DC area and began a private practice in 1989. This practice grew to include seven mental health specialists and was called Psychological Solutions in Gaithersburg, Maryland. She began practice here in her native Altoona in 1995.

Dr. Wiley specializes in the individual treatment of adults and college students experiencing depression, anxiety, panic attacks, relationship concerns, grief and loss, eating disorders, adoption issues, adult Attention Deficit Disorder and Seasonal Affective Disorder.

Dr. Wiley has been active nationally in her profession. She served as Vice President for Professional Practice for the Division of Counseling Psychology in the American Psychological Association from 2000-2003. She completed a four-year term on the Editorial Board of The Counseling Psychologist. (1997-2000), and has served on the Editorial Board of Professional Psychology: Research and Practice (1989 –1992) and as a reviewer for the Journal of Counseling Psychology. She has served as National Chair of the Section on Independent Practice for the Division of Counseling Psychology of the American Psychological Association, and is former President of the Adoption Therapy Coalition. She is a Fellow of the American Psychological Association, and a member of the Pennsylvania Psychological Association, and Central Pennsylvania Psychological Association.