

# Terms and Conditions of Service



*Alegna Solutions*  
Make your future a past worth remembering

## 1. INTRODUCTION

*Alegna Solutions* provides a confidential counseling service for you, your children, family members and friends in a professional, yet friendly, environment. To enable us to make a commitment to all our clients and provide our services with trust and integrity we have set out the following terms and conditions of the provision of these services.

**Prior to commencing your sessions with us we need you to read and acknowledge your understanding of these conditions by signing page 5.**

You will be given a copy for your records when you attend your first appointment.

## 2. YOUR COMMITMENT TO YOUR THERAPY & OUR CANCELLATION POLICY

### ***Mental Health Care Plan (Referral)***

If you wish to obtain a Medicare rebate you must be referred by your GP, psychiatrist or paediatrician who will need to complete a detailed mental health assessment and prepare a Mental Health Care Plan before referring you to a psychologist.

This Mental Health Care Plan should be faxed to us on **07 - 5679 1843** or emailed to us at **reception@alegnasolutions.com.au** no later than 24 hours before your first appointment under this plan. Most GPs usually do this on your behalf upon completing the plan so please check this with them.

This will enable us to process your Mental Health Care Plan in time so that you can receive the Medicare rebate.

*Alegna Solutions* will endeavour to maintain accurate records of your appointments and the validity of your Mental Health Care Plan so that we can advise you when your Medicare entitlements have been used or whether you require a new referral. If you claim benefits under this plan elsewhere or your referrer lodges different/incorrect information with Medicare this will not reflect on our records and they may be incorrect. If in doubt you can contact Medicare to confirm any records.

Any appointments booked and completed outside the validity of a Mental Health Care Plan will not be eligible for a Medicare rebate. The cost of these appointments will be your responsibility at the full fee rate.

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## 3. APPOINTMENT PROTOCOLS

Your treating psychologist has committed time to your appointment and so they can meet all client commitments an SMS reminder will be sent to your nominated mobile number 48 hours prior to each scheduled appointment.

You agree to confirm all appointments by responding directly to the SMS or by phoning us, **no later than 24 business hours before your scheduled appointment.**

**If you do not confirm your appointment by this time it may be released to a waiting list.**

Appointment cancellations or rescheduling is only available by telephone between 10.00am-1.00pm and 2.00-5.00pm Monday to Fridays. *Alegna Solutions* closes for lunch daily 1.00-2.00pm.

Upon confirmation of your appointment, your bank account or credit/debit card will be debited (if applicable) in accordance with the schedule of fees (section 4).

If you do not attend an appointment, any upfront payments made for your appointment will be forfeited and applied against the non-attendance fee. This payment ensures gap payments are fair and maintained at the minimum for everyone.

In exceptional circumstances, your psychologist may choose to credit your account with us the cancellation or non-attendance fee upon receiving an email from you if you are unable to attend an appointment with late or no notice. This email must be received by your psychologist within 24 hours of when the appointment was scheduled. **Please be mindful that your psychologist personally absorbs all costs associated to appointments that are cancelled at short notice or not attended.**

Any Medicare or Private Health Fund claims will be processed at the conclusion of the appointment once a service has been provided – please ensure your benefit provider has your correct details for successful payment. Please allow up to 10 business days for any Medicare rebates to be paid.

If you are late for an appointment, that time will be lost and you still will be charged in full.

## 4. CONFIDENTIALITY

Personal information regarding your treatment will remain confidential and secure, except where:

- a) It is subpoenaed by a court, or
- b) Failure to disclose information would place you or another person at serious & imminent risk; or
- c) Your prior approval has been obtained to:
  - I. Provide a written report to another professional or agency. e.g. a lawyer; or
  - II. Discuss the material with another person, e.g. parent or employer; or if disclosure is otherwise required or authorised by law.

If you are referred by a medical service (such as GP, Psychiatrist, or Paediatrician); your psychologist is required to provide this referrer information relevant to your treatment. Phone calls to Alegna Solutions administration staff and booking agents are recorded for verification and quality assurance purposes only. Any phone calls with your treating psychologist are never recorded unless explicitly stated otherwise and remain strictly confidential.

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## 5. OUR FEES

*Alegna Solutions* is a private practice and receives no government funding. We aim to provide our services at competitive market rates and our fees are based on the type of referral and the psychologist who provides the service.

*Alegna Solutions* is a **cashless clinic** and uses the services of an independent billing company (Debit Success Pty Ltd) to collect any payments relating to our services whether they are current or outstanding. All our fees are payable by direct debit from your bank account or credit/debit card. You will need to complete the direct debit authority below prior to your first appointment. Please read the terms and conditions attached to the authority. You will receive a copy for your records.

**Please note the following (refer to fee table on following page):**

<sup>1</sup> You can claim a Medicare rebate only if you have a current Mental Health Care Plan registered by us from your GP. You may also be able to claim these services from a Private Health Fund if you are a member with extras or full cover. You can choose to either claim using Medicare or your Private Health Fund, but not both.

<sup>2</sup> This fee is waived and service fully bulk billed only for the unemployed, current pension, DVA or health care card holders in addition to patients referred under the Access to Allied Psychological Services (ATAPS) program. By signing this document you assign your right to Medicare benefits to the Practitioner who rendered the service. Applicable documentation/cards will need to be produced to access this discounted service. **A one-time \$35.00 charge however applies upon your initial consultation with us for provision of take home resources.**

<sup>3</sup> For clients who qualify for bulk billing we advise that Alegna Solutions has a weekly bulk billing limit. Our administration team will advise you in advance if the weekly quota has been exceeded and offer you appointments in an alternative week where allowing the continuation of treatment and continue your bulk billing arrangement. Alternatively, should you wish to attend at a time bulk billing becomes unavailable, your attendance will attract the full fee and a gap payment will be required.

<sup>4</sup> Joint/couples consultations are ineligible for Medicare rebate(s) therefore the Australian Psychological Society recommended fee (F24) will apply for this service. Couple/Joint Counselling is booked per consultation hour at recommended fee (F24) per person. Alternatively 2 or more back-to-back standard consultations, 1 for each party is recommended should you wish to book in utilizing your own Mental Health Care Plan referrals incurring individual fee (80110MBS) and rebates.

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FOCUSSED SERVICES PROVIDED BY A PSYCHOLOGIST		UPFRONT FEE	MEDICARE REBATE <sup>1</sup>
50+ min consult in rooms	(80110 MBS)	\$180.00 <sup>2</sup>	\$84.80
50+ min consult outside rooms (by prior arrangement only)	(80115 MBS)	\$260.00	\$106.55
50+ min 2 client joint consult in rooms (fee per person)	(F24 APS)	\$135.00	N/A <sup>3</sup>
<b><u>NOTE:</u></b>			
If Medicare refuses to pay a rebate claim lodged on your behalf for any reason, Alegna Solutions will charge you the applicable amount in full and provide a receipt for any services completed so that you can resolve the issue with Medicare directly.			
<b>OTHER FEES</b>			
Cancellation Fee: where notice is provided <b>under 24 hours</b> prior to scheduled appointment			\$150.00
Non-attendance Fee: charged for confirmed and unconfirmed appointments			\$180.00

**For other services such as tele-psychology, weight loss programs and executive mentoring please also refer to the appendix to this document prepared by your practitioner.**

## 6. CHANGES TO THE TERMS AND CONDITIONS

This Terms and Conditions document may be altered from time to time. We will notify you of any changes including fees and charges at least 30 days before they take effect by email to the address you provide us. Any changes will also be posted to our website [www.alegnasolutions.com.au](http://www.alegnasolutions.com.au) and available at the clinic's reception and waiting areas.

If you do not contact us in writing within 30 days of this notice, we will assume you have accepted the Terms and Conditions in their new form. We will respond to any objections only in writing to which you must retain a copy if a provision for special circumstance/exception has been made.

## 7. PAYMENT METHOD – DIRECT DEBIT AUTHORITY (DDR) – DEBIT SUCCESS

- Any sums payable to Alegna Solutions by the Customer detailed below will be collected by way of direct debit by an independent billing company, DebitSuccess Pty Ltd (ACN 095 551 581), from a bank account or debit/credit card of the Customer's choice as indicated below. All rights of Alegna Solutions to payments from the Customer are able to be enforced by DebitSuccess Pty Ltd as if it were Alegna Solutions.
- DebitSuccess Pty Ltd will make collections on the date nominated by Alegna Solutions such date typically being the date of consultation. Should there be any arrears in payments the Customer authorises DebitSuccess to debit the outstanding balance in order to bring the account up to date.

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3. A one-off Administration Fee of \$10.00 is payable to DebitSuccess by the Customer on signing of this Contract, which will be collected along with the first instalment.
4. DebitSuccess Pty Ltd shall charge a fee of \$10.00 for each reversal of a valid payment initiated by them. Should DebitSuccess Pty Ltd be unable to obtain payment of overdue money after making every reasonable attempt then the debt may be referred to a credit reporting/debt collection agency. The Customer authorises DebitSuccess to add to the outstanding debt a fee of \$50 and an amount equivalent to 25% of the full outstanding balance (being DebitSuccess' expenses reasonably incurred in collecting the debt) upon initial referral to the debt collection/credit reporting agency.
5. A Customer's "personal information" (as that term is defined in the Privacy Act 1988 (Cth)) will only be used by DebitSuccess to provide you with the services contemplated by this Contract from time to time. DebitSuccess' Privacy Statement is to be found on its website [www.debitsuccess.com](http://www.debitsuccess.com).
6. To the extent permitted by law, DebitSuccess hereby excludes any liability of DebitSuccess to the Customer in contract, tort, statute or in any other way for any injury, damage or loss of any kind whatsoever (including, without limitation, any liability for direct, indirect, special or consequential loss or damage), sustained by the Customer and/or any other person, or for any costs, charges or expenses incurred by the Customer, arising from or in connection with this Contract and/or the services/products provided by DebitSuccess, and/or any act or omission of DebitSuccess.
7. If you dispute any debit payment, you must notify DebitSuccess immediately. DebitSuccess will respond to your dispute within 7 working days and will immediately refund the amount of the debit if we are not able to substantiate the reason for it.
8. When the day to debit falls on a weekend or public holiday the debit will be initiated on the next working day.
9. In addition to the responsibilities already mentioned, the Customer is responsible for ensuring that their nominated account is able to accept direct debits. If it is not, it is the Customer's responsibility to provide DebitSuccess with a new account number.
10. Should you have any queries in relation to these terms and conditions you should in the first instance contact DebitSuccess Pty Ltd.  
PO Box 577, Mt Waverley, Vic, 3149, Phone: 1-800 148 848, E-mail: [customerservice@debitsuccess.com](mailto:customerservice@debitsuccess.com).
11. Any Credit Card and/ or Debit Card Payments attract an additional fee of 2% for processing costs.

**Bank Account Details** Transaction Fee 2%

BSB Number    -    Account Name

Account Number           Financial Institution

Or **Credit / Debit Card Details** Transaction Fee 2% Visa/MasterCard

VISA  MASTERCARD CW

Card Number

Expiry Date   /   Card Holder Name

**\*\*\* All clients (including Bulk Billed) are requested to provide bank account, Visa or MasterCard details for direct debit of any charges that may apply to your account with Alegna Solutions. \*\*\***

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## 8. YOUR ACKNOWLEDGEMENT

I/We authorise DebitSuccess Pty Ltd, ACN 095 551 581, APCA User ID Number 184534 to debit my/our account at the Financial Institution identified here through the Bulk Electronic Clearing System (BECS). This authorisation is to remain in force in accordance with the above terms and conditions and I/We have read and agree to be bound by these said terms and conditions.

I acknowledge that I have read and understood the terms and conditions for the provision of psychological services provided by *Alegna Solutions*.

Please PRINT:

**CLIENT Name:**

**CLIENT Signature:**

**Date:**     /     /

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**PRACTITIONER**

**Name:**

**Signature:**

ANGELA ELIA

**Date:**     /     /

Registered Psychologist

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**PARENT/GUARDIAN** (For patients under 18 years)

**Signature:**

**GUARANTOR** (If bank/card details above are not client/patient's)

**Signature:**

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**MEDICARE CLAIMANT**

Parent/Guardian/Guarantor is to be named as claimant for any applicable Medicare benefits: **YES** / **NO** (please circle)