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## **Professional Disclosure**

This document has been prepared to inform you of my qualifications and what you can expect from me as a clinician. Please do not hesitate to ask any questions or discuss this information with me at any time.

## **Philosophy and Approach to Therapy**

As a Licensed Clinical Professional Counselor, I approach therapy from a cognitive-behavioral perspective. Cognitive-behavioral therapy (CBT) is based on the idea that our thoughts (cognitions), how we feel (emotions), and how we act (behaviors) are all interconnected. Psychological distress occurs when people have negative and unrealistic thoughts and, in turn, this can lead to negative behaviors. CBT aims to help people identify these negative and unrealistic thought and behavioral processes so they can begin to develop alternative and realistic thoughts and behaviors in order to reduce psychological distress.

Although I am more CBT oriented, I do provide an eclectic approach based on client needs. I have various tools that I can use within therapy to customize to the uniqueness of the clients I serve. Some of these tools include cognitive-behavioral techniques, experiential exercises, goal setting, homework assignments, and including family members in the therapeutic process.

I am committed to providing you with a safe and caring environment in which we can address your concerns. Studies have shown that successful therapeutic outcomes are related to the quality of the therapeutic relationship between a client and clinician. It is a priority of mine that you feel understood, connected, and engaged in the therapeutic process and involved in making therapy an effective and productive experience.

## **Formal Education and Training**

*Degrees:*

M.A., Professional Counseling, Liberty University, 2012

B.S., Behavioral Sciences, North Central University, 1998

### *Licenses/Credentials:*

Licensed Clinical Professional Counselor, Illinois, #180.010917, 4/2017-3/31/2023

Licensed Clinical Professional Counselor, Montana, #BBH-LCPC-LIC-49347,  
6/2021-12/2022

Clinical Mental Health Counselor, Utah, #12903813-6004, 2022-9/2024

Licensed Clinical Professional Counselor, Maine, #CC6795, 2022

## **Confidentiality**

All interactions which take place in the setting of therapy are considered confidential. This includes requests by telephone, all interactions with this counselor, any scheduling or appointment notes, all session content records and any progress notes that I take during your sessions. I will not even verify that you are a client. You may choose to give me permission in writing to release any or specific information about you to any person or agency that you designate.

### Limits to this agreement

1. In some legal proceedings a judge may issue a court order. This would require this counselor to testify in court.
2. If I learn of or believe that there is physical or sexual abuse or neglect of any person under 18 years of age, I must report this information to county child protection services.
3. If I learn of or believe that an elderly person, or disabled person is being abused or neglected, I must file a report with the appropriate state agency that handles elder abuse.
4. If I learn of or believe that you are threatening serious harm to another person, I am obligated to report this. This can be in the form of telling the person who you have threatened, contacting the police or placing you into hospitalization.
5. If there is evidence that you are a danger to yourself and I believe that you are likely to kill yourself unless protective measure are taken, I may be obligated to seek hospitalization for you or to contact family members or others who can help provide protection
6. There may be times when I consult with outside sources about cases. In these cases, no personally identifiable information will be used to discuss this case. However, discussion topics will be used in order to ensure that I am getting and giving the best assistance possible. The persons with whom I discuss cases are legally bound to keep information confidential.

## **Areas Of Competence**

Teens

Adults 18 and older

Couples Counseling

Depression

Bipolar disorder

Anxiety

Relationship Issues

Spirituality (Christian faith)

Life Transition Issues

Women's Issues

Deaf Culture (Fluent in ASL)

Grief & Bereavement

## **Course of Action**

### **Intake, Assessment, Diagnosis & Treatment Planning**

The biopsychosocial assessment is the first part of the assessment process. The ability of the counselor to perform this task well is very important. Assessment is a large part of treatment and continues throughout the course of treatment. The counselor must assess the client on a regular basis. The purpose for this is that as the counselor becomes more aware of the clients issues, they can discover undiagnosed problems. In many cases, as the client begins to understand and overcome obstacles some other problematic pathological issues might begin to surface. The client might present with issues of depression but during therapy might reveal problems with substance abuse or anxiety. Life factors might also play a part in assessment during therapy. If the client begins to suffer from life altering events such as divorce or family deaths this can also be an important time to assess.

The point of a good initial intake and assessment will help the clinician to interact with the client. It will allow the therapist to hone in on the issues that are most important to the client. This process helps to discover issues that will impact treatment. This will be an initial time to bring about a more fulfilling therapeutic relationship. This is the time for the client to understand the therapists and their own role in therapy. The clinician can begin to see behaviors that are the core of the problems that the client wants to address.

The results of this assessment should assist in finding a diagnosis and also suggest the focus treatment. Treatment planning is the process by which the clinician and client identify and rank problems needing resolution; establish agreed upon immediate and long-term goals; and decide upon a treatment process and the resources to be utilized.

## **Professional Fees**

You are responsible for paying at the time of your session unless prior arrangements have been made. Payment must be made by check or cash. If you refuse to pay your debt, I reserve the right to use an attorney or collection agency to secure payment.

If you anticipate becoming involved in a court case, I recommend that we discuss this fully before you waive your right to confidentiality. If your case requires my participation, you will be expected to pay for the professional time required.

Fees are non-negotiable. To receive sliding scale fees, you must present proof of income through recent pay stubs or tax forms. Fees are subject to change at counselor's discretion.

### **Fee Schedule**

90791 psychiatric diagnostic evaluation (Intake) – \$200

90834 psychotherapy 45 minutes – \$130

90837 psychotherapy 60 minutes – \$165

90846 family psychotherapy with the patient present – \$180

90853 group therapy 90 to 120 minutes - \$80

### **Sliding Scale**

#### 50 minute individual session

\$30,000 (Yearly) and below: \$50

\$30,001 (Yearly) to \$50,000: \$60

\$50,001 (Yearly) to \$70,000: \$90

\$70,001 (Yearly) to \$90,000: \$100

\$90,001 and above: \$150

## **Insurance Benefits**

As a service to you, we will bill your insurance company. All co-pays, deductibles and non-covered charges are due at the time of service. It is your responsibility to determine whether our office is an in-network or out-of-network provider under your insurance plan. Out-of-network claims may be paid less insurance benefits, require payment of a higher deductible amount, and/or require a larger patient payment. You are financially responsible for all charges not paid under your insurance plan.

We will bill your secondary, and if applicable, tertiary insurance. If we do not receive payment on a secondary claim within 60 day of billing, we will expect payment from you. We encourage you to contact your insurance company to inquire about delays in the payment of claims.

## Accountability

The practice of counseling in Maine is regulated by the Board of Counseling Professional Licensure. The board is authorized by law to discipline counselors who violate the board's law or rules, To learn about the complaint process, or to file a complaint against a counselor, contact:

Complaint Coordinator  
Office of Professional and Occupational Regulation  
35 State House Station  
Augusta, ME 04333  
Phone: 207.624.8660  
Web: [www.maine.gov/professionallicensing](http://www.maine.gov/professionallicensing)

The practice of counseling in Illinois is regulated by the Illinois Department of Financial and Professional Regulation. The board is authorized by law to discipline counselors who violate the board's law or rules, To learn about the complaint process, or to file a complaint against a counselor, contact:

Department of Financial and Professional Regulation  
Division of Professional Regulation  
Complaint Intake Unit  
555 West Monroe Street, 5th Floor  
Chicago, IL 60661  
Phone: 312.814.6910  
Web: <https://idfpr.illinois.gov/admin/DPR/DPRcomplaint.asp>

The practice of counseling in Montana is regulated by the The Montana Department of Labor & Industry and Professional and Occupational Licensing Boards. The board is authorized by law to discipline counselors who violate the board's law or rules, To learn about the complaint process, or to file a complaint against a counselor, contact:

COMPLIANCE UNIT  
PO BOX 200514  
HELENA MT 59620-0514  
Email: [dlibsdc Complaints@mt.gov](mailto:dlibsdc Complaints@mt.gov)  
Web: <https://bsd.dli.mt.gov/filing-complaints>

The practice of counseling in Utah is regulated by the The Utah Department of Occupational & Professional Licensing Boards. The board is authorized by law to discipline counselors who violate the board's law or rules, To learn about the complaint process, or to file a complaint against a counselor, contact:

Attn: Investigations

Division of Occupational & Professional Licensing 160 E 300 S

PO Box 146741

Salt Lake City, UT 84114-6741

Phone: 801.530.6630

Web: <https://dopl.utah.gov/complaint/index.html>