

## **NEW DAY FOUNDATION FOR FAMILIES EMOTIONAL SUPPORT PROGRAM**

### **Mental Health Professional Agreement**

**1. The mental health professional will perform their duties with the utmost level of integrity and professionalism.**

- The mental health professional must abide by the ethical standards outlined by the State of Michigan and the practice in which they are licensed.

**2. The mental health professional agrees to the following:**

- Provide Therapy (Individual, Joint, Couples, Family, and/or Group Therapy per the mental health professional's ability to provide) to the referred program participant at the business address where clients are seen (as indicated on "New Day Foundation for Families Emotional Support Program – Mental Health Professional Questionnaire") or via HIPPA compliant teletherapy platform.
- Review "New Day Foundation for Families Emotional Support Program – Participant Release of Information" form completed by the program participant to allow appropriate communication between New Day and the mental health professional and vice versa.
- Follow Michigan law regarding confidentiality.
- Maintain professional liability insurance and provide New Day with a current copy of the declaration page.
- If the program participant carries health insurance accepted by the mental health professional, the insurance may be used prior to the New Day emotional support program if there is no cost to the participant.
- Sign and submit a W-9 form.
- Maintain and keep secure all client therapy records, case notes, and confidential information at their own professional business sites.
- While the participant is in the emotional support program, the mental health professional will not solicit New Day program participants as clients outside of this agreement. After a participant has completed their emotional support award from New Day, the participant may choose to continue therapy services with her/his mental health professional at that time, New Day would not be the payer for services and would not be a party to the relationship.

**3. Duration of Agreement, Rates, & Payment:**

- New Day and/or the Mental Health Professional have the right to terminate this agreement at any time within ethical boundaries of continuity of care by giving two-week notice one to the other
  - Amendments to the agreement must be agreed upon by both New Day and the Mental Health Professional
  - New Day will terminate this agreement immediately in cases of alleged misconduct by the Mental Health Professional
- Rates
  - The mental health professional agrees to provide 5 pro bono sessions per calendar year.

- Ongoing sessions will be paid at a standard rate of \$60.00 per hour for a 50-minute therapeutic hour, per week, for individual/family therapy. This rate applies to in-person, telephone, or virtual sessions and will apply to all billed sessions. Rates will be paid in full by New Day for emotional support program participants. It is possible that rates may be paid fully by the participant or may be shared between the participant and New Day, and such arrangements will be communicated by New Day to the mental health professional when applicable.
- For Participants who “no show/no call” or provide a late cancellation (less than 24 hours):
  - The standard rate will be paid one time by New Day and count toward the 8 total sessions allocated to them through the emotional support program.
  - If a participant continues to “no show/no call” and/or “late cancel,” it is at the discretion of the assigned mental health professional to continue or terminate therapy with such participant. If the mental health professional continues to see the participant, the professional should understand that they will not be reimbursed by New Day for any “no show/no calls” and/or “late cancellations” that exceed one occurrence.

- Payment

- The mental health professional must submit an invoice with identification of sessions that were pro bono to the emotional support program manager, currently Jenny Moeller (Jenny@NewDayFF.org), to receive payment for services. It is preferable for mental health professionals to submit their invoice/communication form once per month. Mental health professionals may also choose to submit their invoices at the completion of the program award for that participant.

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Signature of Mental Health Professional

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Date