

# Beverly J. Millican-Hicks, M.Ed., L.P.C.

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2301 Stonehenge Dr. Ste. 202 • Raleigh, North Carolina 27615 • [www.HicksCounseling.com](http://www.HicksCounseling.com)

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## Professional Disclosure

I believe the counseling experience is one in which there is a personal relationship based on trust within a safe and confidential environment. This document is part of the standards of practice of the North Carolina Board of Licensed Professional Counselors. Please read this statement prior to our first session.

### Education & Experience:

I have a Masters in Education from Southern Methodist University in Dallas, TX. My area of special interest and experience is working with couples in marriage counseling and individuals who have been abused or have experienced other traumatic events, as well as individuals suffering from mood and personality disorders. My experience includes working with individuals, families, couples, addictions, high risk youth, chemically dependent individuals and their families, the dually diagnosed, as well as the geriatric population.

I am a Licensed Professional Counselor (LPC # 2874) with the North Carolina Board of Licensed Professional Counselors. In addition, I am a Certified Clinical Supervisor (CCS #176) as well as a Certified Substance Abuse Counselor (#1013) with the North Carolina Substance Abuse Professional Certification Board. I am a Licensed Marriage and Family Therapist (LMFT, TX #003662-003801) and a Licensed Chemical Dependency Counselor (LCDC, TX #3377).

I also hold memberships with the North Carolina Counselors Association, the Licensed Professional Counselors Association of NC, NC Association of Student Assistance Professionals, Texas Association of Alcohol and Drug Abuse Counselors and the National Association of Alcoholism and Drug Abuse Counselors.

### Counseling Philosophy:

The purpose of counseling is to help individuals, couples and families resolve issues that are interfering with the enjoyment of the process of life. You may want to resolve specific problems or bring a more positive balance to your life. Whether it is individual, couple, family or group counseling, we will initially determine your goals and assess if we can work together to meet them. As counseling continues, we will regularly evaluate our progress to determine if your goals have been met or if there is a need for additional sessions, termination, or a referral to another practitioner for counseling or assistance.

Counseling sessions will be held within the counseling office only. For your best interests and to protect your personal rights, our relationship must remain professional at all times; this means that even though our relationship may seem very intimate, you must remember that I am only sharing with you as a professional and focusing on the goals you have indicated you desire to reach. This is the primary purpose of our relationship.

### Fees and Insurance Reimbursement:

My fees are \$160 for your initial visit and \$145 per 45-50 minute follow-up visit. All payments are due at the time of service. I accept cash, checks or credit/debit card. If you are unable to come with your child to attend therapy please send them with the appropriate payment. Clients are responsible for

contacting their insurance company to obtain authorization, co-pay, deductible and benefit period information.

Please be aware that any personal information or diagnosis provided to an insurance company can no longer be held to the same standard of confidentiality, and may well become part of your permanent insurance record. Appointment cancellation must be made at least 48 hours in advance to avoid being charged a missed appointment fee of \$75.

#### Confidentiality:

All information shared will be kept confidential with the following exceptions.

- 1) If I believe you are a danger to yourself or someone else
- 2) In case of abuse to a child or an elderly person confidentiality will be waived
- 3) If you give me written permission to disclose information
- 4) If the information is court ordered
- 5) In case of a medical emergency
- 6) If you desire to seek reimbursement from a managed care company, the disclosure of confidential information may be required for reimbursement
- 7) If accusations of misconduct are brought

I also understand and agree that for the purpose of ensuring highest quality care and with my agreement, my case may be discussed in conference or supervision with other psychologists or mental health professionals. If I should default in paying the balance of my account with HCS, then I understand that identifying information and dates of service may be disclosed if litigation or collection action becomes necessary.

#### Emergencies:

In a medical emergency please call 911. Hicks Counseling Services uses a confidential voice mail system. Even with a good communication system, there may be circumstances under which I cannot immediately respond to a client's needs. If such an urgent situation arises please contact Holly Hill Hospital Respond program to obtain the support of their counselors. The Holly Hill Respond telephone number is 919-250-7000.

#### Complaints:

If, at any time, you feel my behavior or my counseling approach is inappropriate or troubling to you, please let me know. If, however, you do not feel your concerns are being addressed appropriately, feel free to contact any or all of the following:

North Carolina Board of Licensed Professional Counselors  
PO 77819  
Greensboro, NC 27417  
Phone: (844) 622-3572 or (336) 217-6007 Fax: (919) 779-5642  
E-mail: [Complaints@ncblpc.org](mailto:Complaints@ncblpc.org)

The North Carolina Substance Abuse Professional Certification Board  
PO Box 10126  
Raleigh, NC 27605  
(919) 832-0975 Fax: (919) 833-5743

