

Neurotherapy Institute of Central Illinois

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Informed Consent for Neurotherapy and Neurofeedback Treatment

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Neurotherapy Defined: Neurotherapy uses individually designed and neurotherapist administered, clinical EEG (electroencephalogram) neurofeedback to help correct dysregulated brainwave activity associated with psychological, behavioral and cognitive problems. The brain's electrical activity can become dysregulated for many reasons. Some of these include genetic predispositions, early childhood illness, emotional trauma, head injury, substance abuse, excessive I-technology use and ageing. This dysregulation results in neurological over activation (ex. anxiety, hyperactivity, insomnia), under-activation (ex. depression, inattention, movement disorders) and/or unbalanced activation (ex. bipolar disorder, trauma, Autism Spectrum Disorders). These patterns of dysregulation can be changed, toward their more normal ranges of functioning, using simple, but profoundly effective, principles of reinforcement. After thorough assessment of a client's unique patterns of dysregulation, a treatment plan is designed that employs lifestyle changes, brain-based supplements, biofeedback for improved physiological self-regulation, neurofeedback for improved neurological self-regulation and counseling, when needed, to support any personal, marriage or family concerns. Over time, by employing cutting-edge, research-based neurofeedback training protocols, the brain's neurological activity becomes re-regulated toward healthier neurological self-regulation. As this occurs, the presenting symptoms decrease, the need for medication may decrease and more effective emotional, behavioral and cognitive functioning is restored. Neurotherapy does not make all life problems disappear. It does not heal physiological damage to the brain or the central nervous system. It can, however, utilizing well established principles of neuroplasticity, recruit adjacent neurons, strengthen weakened neurons, improve neuronal network communication and help re-establish healthier neurological functioning.

Applications: Neurotherapy has been used to treat many emotional, behavioral and cognitive problems. Some of these include: attention deficit and hyperactivity disorder, learning disabilities, anxiety and panic disorder, depression, chronic pain, obsessive-compulsive disorder, post-traumatic stress disorder, traumatic brain injury and post-concussion syndrome, conduct disorder, attachment disorder, Autism Spectrum Disorders, schizophrenia, stroke, epilepsy, dementia, sleep disorders, developmental disorders, tics, alcoholism and substance abuse. It has also been used by NASA, the US Military, Professional Athletes and Fortune 500

companies to achieve alertness, emotional regulation, mental flexibility and peak performance.

Efficacy of Neurotherapy: Some selected research findings on neurotherapy have found a 75% reduction in ADHD symptoms, increase of 9 to 23 IQ points for learning disabled children, 80% sobriety for alcoholics after four year follow-up, only 20% relapse of panic attacks after 30 months for veterans with PTSD, 70% reduction in epileptic seizures, 88% improvement in depression after one year, 90% reduction in anxiety across meta-analysis of 26 studies, significant improvement in cognitive efficiency for those with cognitive decline and marked increases in sociability, communication, health, and sensory awareness of children with Autistic Spectrum Disorder. Although the research is impressive, neurotherapy is not a “cure-all.” All clients should not expect these results. Individual results will vary depending upon the type, severity, and complexity presenting problem, client’s overall physiological health, client cooperation, and client completion of the neurotherapy treatment recommendations. Neurotherapy has been and continues to be reviewed by the Food and Drug Administration (FDA). To date the FDA has found neurotherapy equipment to be safe and suitable for use by qualified professionals. It has also found it to be effective for general relaxation and muscle re education. The American Psychological Association (2017) noted, “Neurofeedback remains a viable treatment of choice for patients with sufficient time, money and motivation to pursue it.” However they also urged continued research to better understand and differentiate the neurological and client demand mechanisms (perceptual biases) that likely contribute to its effectiveness. It is important to note that the Neurotherapy Institute of Central Illinois has made significant contributions to this research through numerous professional presentations to state, national and international professional associations, published articles, book chapters, books, and our own research on neurofeedback for ADHD and trauma. For more information visit our website at <https://chapinandrussell.com/clinical-neurotherapy/>.

Overview of the Cost of Neurofeedback: Neurofeedback services are priced in two parts. These include (1) the Neurofeedback Assessment and Treatment Plan and (2) the Neurofeedback Training Package. Each client must complete a comprehensive Neurofeedback Assessment and Treatment Plan to determine the exact nature and of their unique pattern of neurological dysregulation. This essential information is then used to design an individualized treatment plan that includes: recommended lifestyle changes, brain-based supplements, biofeedback for physiological self-regulation, neurofeedback for neurological self-regulation, and counseling, when needed, for support with current personal, marital or family problems.

Neurofeedback Assessment and Treatment Plan Options: There are three Neurofeedback Assessment and Treatment Plan options. They are selected, based upon the complexity of the client’s neurological dysregulation and the assessment necessary to design their individualized treatment plan.

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Basic 5 Channel QEEG and Treatment Plan Clients with mild to moderate dysregulation will complete the Basic 5 Channel (5 major brain locations) QEEG and Treatment Plan. This consists of psychological screening tests to measure the relative

presence of anxiety, depression, trauma and attentional problems, the computerized tests including the Test of Variable Attention (TOVA) and the Basic 5 Channel QEEG brain assessment. This package is priced at \$960.

Comprehensive 19 + 5 Channel QEEG and Treatment Plan Clients with more moderate to severe, or more global (across the brain) dysregulation, will need to complete the Comprehensive 19 + 5 Channel QEEG and Treatment Plan. This consists of the psychological screening tests, computerized test and the Comprehensive 19 + 5 Channel QEEG brain map assessment. Note, while the 5 Channel QEEG is clinically normed, the 19 Channel QEEG (all 19 locations across the brain) is normed to the general population. These represent two distinct comparison groups and allow us to more fully understand neurological dysregulation across the brain. This is priced at \$1920.

Recent TBI: 19 + 5 Channel QEEG and Treatment Plan Clients with a recent (1 to 6 months) traumatic brain injury (TBI) will complete the Recent TBI: 19 + 5 Channel QEEG with Treatment Plan. This consists of the psychological screening tests, with additional brain injury specific testing of anger, executive function and mental status, the computerized tests, and the 19 + 5 Channel QEEG brain map. This is priced at \$2280.

Required Psychosocial Medical History and Treatment Plan Results Sessions:

All Neurofeedback Assessment and Treatment Plan options also require a thorough psychosocial medical history and a treatment plan results sessions. This allows us to understand possible sources of neurological dysregulation and inform clients of any significant assessment results and the strategies to treat them. The cost of these sessions are priced at the counselor's usual clinical rate, as posted in the Chapin & Russell Associate's (CRA) Informed Consent Agreement. Note, some insurance coverage may be available for these services and typically involve any usual deductible and copay cost. If insurance coverage is not available, these are priced at the CRA self-pay rates.

Neurofeedback Training Packages: While there is no required commitment to engage neurofeedback training after the assessment and treatment plan are completed, most clients are eager to begin improving their brain's neurological self-regulation.

Initial Discounted 20 Session Neurofeedback Training Package Once engaged, Neurofeedback Training packages require a minimum commitment to the Initial Discounted 20 Session Neurofeedback Training Package. Although individual treatment plans may vary (based on the nature and complexity of neurological dysregulation) in the number of recommended training sessions, they are all priced at the same session rate. It is important to note that the cost of neurofeedback training is significantly less than the customary and usual cost of personal counseling with a licensed clinical psychologist, priced at \$240 per hour. Neurofeedback training is priced at \$220.00 an hour. When clients commit to the initial 20 Session Neurofeedback Training package,

the price is further reduced to \$215.00 per hour or \$4300.00 for the initial 20 session package.

Continuing 10 Session Neurofeedback Training Package Once the Initial Discounted 20 Session Neurofeedback Training sessions are completed, clients have the option to “pause their neurofeedback training.” However, most choose to continue their neurofeedback training with the next 10 recommended sessions. These are also priced at the same discounted rate of \$215.00 per hour or \$2150.00 for the next 10 session package. Every 10 sessions, clients are asked to complete a Symptom Checklist to document their progress and to guide the neurotherapist in continuation of their treatment plan. While there is no obligation to complete the entire treatment plan, the “best results” occur when all recommended sessions are completed.

“All training packages must be paid in advance and are not refundable.”

Neurofeedback Staff Credentials and Optimal Training Experience: Unlike other neurofeedback providers, all of our staff have completed Professional Neurofeedback Certification Training. Two of our staff are fully Board Certified in Neurofeedback and several others are working toward full Board Certification. This expertise is very important. It provides clients with the highest quality available, trained neurofeedback practitioners. Further, all of our neurotherapists remain in the neurofeedback lab with their clients throughout every minute of their training, monitoring their brainwave activity in real time, and assuring that clients receive the most optimal training experience possible from each neurofeedback training session.

Optional Post-Testing In addition to the Symptom Checklist, completed every ten sessions, clients also have the option to track changes in their neurological self-regulation with post-testing of their 19 Channel QEEG brain map. The cost of each re-administered 19 Channel QEEG brain map is \$960.

Missed Session and Late Arrival Charge: The charge for missing any scheduled neurofeedback session is \$215 and must be paid before the next training session. The neurotherapist will hold each scheduled session for 10 minutes, but due to scheduling demands and reduce time before the next appointment, any arrival after 10 minutes, will be rescheduled with the \$215 missed session charge.

Insurance Assignment, Documentation and Available Counseling: Since most insurance companies do not reimburse for neurofeedback services, ***“We do not accept insurance assignment for neurofeedback services.”*** We do provide clients with a statement following each training session that contains the information they may need to seek reimbursement from their insurance provider. Any additional time requested by clients to submit the treatment plan, prepare a case summary or provide a comprehensive bill to their insurance company, is charged at the counselor’s usual clinical rate as posted in the Chapin and Russell Associate’s Informed Consent Agreement. Any requested counseling services are also charged at these rates.

Neurofeedback Fee Schedule

Neurofeedback Assessment Fee Initial Discounted 20 Session Combined Fee and Treatment Plan Options Neurofeedback Training Fee

Basic 5 Channel QEEG with \$960.00 \$4300.00 \$5260.00 Treatment Plan

Comprehensive 19 + 5 Channel \$1920.00 \$4300.00 \$6260.00 QEEG with Treatment Plan

Recent TBI: 19 + 5 Channel \$2280.00 \$4300.00 \$6580.00 QEEG with Treatment Plan

See details, other options and included items* below.

Neurofeedback Assessment and Individualized Treatment Plan Psychosocial

Medical History Typically covered by insurance with applicable deductible and/or co-pay.*

Basic 5 Channel QEEG Assessment Package (4hrs) \$ 960.00

Comprehensive 19 + 5 Channel QEEG Assessment Package (8hrs) \$1920.00 Note: Necessary when Global Neurological Dysregulation is Indicated.

Recent TBI (Head Injury): 19 + 5 Channel QEEG Assessment Package + TBI (9hrs) \$2280.00

Note: Necessary with Recent TBI Requiring Full Concussion Protocol

Results and Treatment Plan Session Typically covered by insurance with applicable deductible and/or co-pay.*

Optional 19 Channel QEEG Post-Test (4hrs) \$960.00 **Optional 5 Channel QEEG**

Post-Test(1hr) \$240.00

Neurofeedback Training

Initial Discounted 20 Session Training Package (\$215.00 x 20 Sessions) \$4300.00 **Additional Discounted 10 Session Training Packages** (\$215.00 x 10 Sessions) \$2150.00 Note: Most clients need 30 to 40 sessions. Complex cases typically require more.

Counseling Services

Available as Needed or Recommended by the Neurotherapist

*See Chapin & Russell Informed Consent Statement for Details on Cost of Psychosocial medical History session, Results and treatment Plan session and Counseling sessions.

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Questions to Ask if Inquiring about Insurance Coverage:

1. Do you cover biofeedback, EEG biofeedback or biofeedback assisted psychotherapy? If yes, under medical or psychological services?

2. Do you cover services provided by the Neurotherapy Institute of Central Illinois under the Federal Tax ID number 45-2580855? Please note neurofeedback is only provided under this TAX ID number. Any necessary counseling service is provided under the Chapin & Russell Associates Federal Tax ID of 37-1337853.
3. Will you cover services for problems and/or symptoms of _____?
4. What rate do you pay (Ex. billed amount, 80% of billed amount or usual and customary)?
5. If covered under medical, do I need a referral from my primary care physician?
6. How many sessions will you cover (20, 30, 50, unlimited)?
7. Do you cover an out-of-network provider? If so, do I need a primary care referral?
8. What is the licensing requirement of the provider?
9. What do you reimburse for CPT codes: 90791, 90834, 90837, 90876, 96136, 96137, 96130, 96131?

Third Party Liability Insurance Provider Claims: Some clients may be seeking neurotherapy services, post-accident and may be involved with a third-party liability insurance provider (ex. Worker's Compensation) who is administering their claim. In this event, all services for clients who plan to use a third-party liability insurance provider to obtain reimbursement for expenses incurred for neurotherapy, in a post-accident claim, are self-pay (to be paid by the client). Clients who wish to start services before obtaining approval for reimbursement, may immediately begin assessment and treatment. Clients who prefer to make sure they have approval for reimbursement of these services are encouraged to secure that approval in writing, before beginning neurotherapy assessment and treatment. When requesting approval from the liability carrier for reimbursement, the services requested should include but not be limited to: an initial assessment and history session, psychological testing, computerized testing, five and nineteen channel EEG assessment, an assessment results and treatment plan session, any necessary ongoing counseling, and biofeedback assisted psychotherapy (neurofeedback). Clients are encouraged to use the questions listed above, to guide their communication with the liability carrier. The fees for the neurotherapy related services are also noted above. Please see the Chapin & Russell Informed Consent for most recent fee schedule for the initial assessment and psycho-social medical history session, the results and treatment plan session, and any necessary personal, marriage and/or family counseling.

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Requests for Assistance with Insurance Authorization: Requests to assist clients in obtaining confirmation of insurance coverage through written correspondence or telephone communication with client's insurance provider will be billed at \$195.00 per hour and is due before treatment begins. Clients will be provided a service invoice after each session that is suitable for submission to their insurance provider for reimbursement as their insurance

provider may allow.

Alternate Payment Plan Option: An optional, “undiscounted,” neurotherapy payment plan is available to help spread out the expense of neurofeedback training. It is priced at the original \$220 per session rate but allows clients the option to split the cost of the initial 20 session package into two payments. The total twenty-session cost is \$4400. This plan requires a fifty percent upfront payment of \$2200, with the other fifty percent, or \$2200, due before the tenth treatment session is completed.

Procedure: Neurotherapy is a noninvasive and generally comfortable procedure. Following a detailed evaluation, including a psychosocial interview, psychological testing, computerized test of variable attention and cognitive functioning, and an EEG baseline assessment, a client is assigned one or more customized training protocols and then prepared for a neurotherapy session. One session of biofeedback training is highly recommended before beginning neurofeedback since it has been found to significantly improve neurofeedback training results. During neurofeedback, the client is seated in a comfortable chair in front of a computer monitor and fitted with electrode sensors. A small amount of conductive paste is used to secure electrodes to the head. Two adhesive electrodes are attached behind each ear. These do not hurt and act only to convey brainwave activity between the client and computer software. Electrodes “do not” emit any electrical charge. Next, specialized computer software operates a movie or music DVD, that play when the client is meeting training protocol thresholds and pauses when they are not. The brain will want to get the DVD to play. When it does so, this reinforces the desired brain activity and thus teaches the client how to re-regulate healthier brainwave activity. This requires no conscious effort and provides the brain with constant feedback, until the brain learns to function in a healthier manner. A neurofeedback session lasts as long as a regular counseling session but the training portion, usually takes between 20 to 30 minutes. The average number of needed neurofeedback sessions is about 30. More complex problems often require 40 to 60 or more sessions. As previously noted, Neurotherapy also involves at least one session of biofeedback training, to include Heart Rate Variability and Peripheral Skin Temperature biofeedback. These have both been found to significantly enhance the effectiveness of neurofeedback training. Neurotherapy may also involve the use of Touchpoints bilateral stimulation, take home CD neuro-harmonics or the use of audio-visual entrainment to help calm physiological arousal or consolidate gains made in neurofeedback training. Once training is completed, the brain is re-regulated and no further treatment is usually required. Should the brain later experience a dysregulating event (ie.

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substance abuse, emotional trauma, head injury or other unhealthy lifestyle change), retraining may be needed.

Best Candidates: The best candidates for neurofeedback training have a specific problem such as ADD, depression, anxiety or behavioral problems that can be related to a specific brain

region. They may be on medication. They often come from loving families, are not in a current crisis, have a regulated sleep pattern, do not have a history of serious interpersonal problems, have supportive relationships with school and work, have a relatively structured home environment and are willing to follow suggestions regarding diet, exercise, sleep, limited screen time, and other therapeutic interventions including personal, marriage and family counseling. They are also able to meet the financial and time commitments necessary to complete the full recommended treatment plan and training schedule.

Clients with more complicated, vague or unusual complaints, such as fibromyalgia, severe sleep deprivation, or those with more complex problems such as dissociative identity disorder, bipolar or borderline personality disorder, children with Autism Spectrum Disorder, severe conduct or learning disorders, clients with psychotic behavior or those with traumatic brain injury, seizures, stroke or significant cognitive deficits, frequently require more extensive neurofeedback training. They also typically benefit from counseling and will continue their medical treatment as indicated by their physician. The complexity of these problems responds best to a multidisciplinary approach and the use of brain network neurofeedback protocols, in order to achieve meaningful symptom reduction.

Contra-Indications: Neurofeedback is not indicated for those who are experiencing significant immediate psychosocial distress, those actively using substances (alcohol, drugs, and nicotine) at the time of treatment, those unwilling to follow treatment plan recommendations and those who can not meet the financial and time commitments necessary to complete the full neurofeedback treatment plan.

Possible Transient or Adverse Side Effects: Possible transient or adverse side effects are very rare, usually minor and short-lived. They can include initial headache, tiredness, moodiness, feeling spacey or anxious, having difficulty falling asleep, experiencing nightmares, eye ache, emotional confusion, and nausea. Most of these pass in a short time and only occur in 1 to 3% of clients. Some ADHD clients report a period of boredom during the middle stages of treatment, while their brainwaves become more familiar with their re-regulated levels of activity. Some PTSD clients report moodiness and the emergence of nightmares or distressing memories. This is a positive, but sometimes distressing occurrence for clients and should be discussed in counseling with their neurotherapist. While using substances, fifty percent of persons with substance abuse problems, may develop a more negative and dissatisfying response to their previous substance of abuse. Clients with more moderate to severe problems

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may feel more emotional as their brain function begins to improve, necessitating counseling, to learn healthier coping strategies, toward better management of these still unsettling but more normal emotional states. Finally, the skin beneath the electrode sensors can sometimes become slightly irritated. This is usually a minor problem that quickly resolves itself.

Managing Medication Issues: As neurofeedback training concludes, some clients may notice an increase in medication side effects or uncomfortable physiological changes in response to their current medication. This may indicate that the client's need for medication has diminished and it may be time to consider reducing or discontinuing the medication altogether. Some clients, in cooperation with their physician, will engage a medication holiday as a trial period without medication, before full discontinuation. Any medication adjustment is advised only after clients have consulted with their physician.

Supplements: Some clients will begin neurofeedback already taking dietary supplements. These may be continued during and after neurofeedback. Other clients, not taking any supplements before neurofeedback, may be encouraged in their treatment plan, to consider taking brain-based, dietary supplements to support their efforts in neurofeedback. Before taking any supplements, it is best to speak with a registered dietician or nutritionist, to determine its benefits and possible limitations in your personal situation. Possible interaction effects of dietary supplements and medication should be discussed with your physician.

Limitations: Neurotherapy is one of three treatment options, including counseling and medication, toward the resolution of psychological problems. In many cases, client's problems are best addressed with a combination of approaches. In others, one approach may be sufficient. Neurotherapy training can not guarantee the full elimination of problematic symptoms and is not equally effective with all clients and all problems. Neurotherapy is not a substitute for an MRI or a CAT Scan. It can not diagnose a head injury, tumor, epilepsy, migraine or other medical condition. It can not heal physiological brain damage but can help restore functioning or areas around the damage. Medical conditions must be evaluated and treated by a physician or neurologist. Clients who are experiencing any of these conditions must obtain a release from their physician before beginning neurotherapy.

Client Role: Clients are expected to monitor and communicate their subjective experience of neurotherapy with their neurotherapist. Clients are also expected to complete periodic symptom checklists every ten sessions to assess their progress, so neurotherapy effectiveness can be evaluated, protocol adjustments can be made, and the treatment extended or discontinued as indicated. Finally, clients are expected to follow other treatment recommendations including: lifestyle changes, brain-based supplements, biofeedback, counseling and other home-based interventional strategies as indicated.

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Voluntary Participation and Consent: I have been informed of the reasons why neurotherapy and neurofeedback have been recommended to me. I understand the other treatment options available (counseling and/or medication) if I or my child decline to give my informed consent. I have read this form and understand the potential benefits, costs, contra

indications, limitations, and possible side-effects of neurotherapy and neurofeedback. I understand that although the research on neurotherapy and neurofeedback is very promising, individual results cannot be guaranteed and depend on many factors including: the extent of my problems, my willingness to engage the full range of treatment recommendations, and the limits of neurofeedback treatment for any specific condition. I hereby agree, freely and voluntarily, to undergo (or have my child undergo) neurotherapy and neurofeedback.

Client
or Parent Date Neurotherapist Date