



## Heartland Assistance Program (HAP) Contract

### Individuals Present at Initiation of Contract:

Stalin George  
L.M.H.C – Assistance Program Coordinator

Heartland Liaison  
Clinician title

Organizational Contact  
Name and Title

### Name of Organization Considering HAP services with Heartland:

**Name:** Click or tap here to enter text.

**Address:** Click or tap here to enter text.

**Telephone:** Click or tap here to enter text.

**Date of Initiation of Contract:** Click or tap here to enter text.

### MISSION OF HEARTLAND ASSISTANCE PROGRAM (HAP):

*"To Provide excellence in Christ-Centered Psychological Services to our community loved by God."*

### SCOPE OF SERVICES WITHIN HAP:

The assigned Heartland Clinician will work as a contracted Clinician. The scope of practice will be to provide mental health services to the organization identified above. The nature of contracted services is described below.

### NATURE OF CONTRACTED SERVICES WITHIN HAP:

- Heartland Christian Counseling through a liaison will work together with the organization's leadership in order to come up with an overall plan for services to be provided to the organization under HAP for one year.

- The Heartland Clinician will be available to participate in staff meetings either in person or via teleconference (Zoom or Phone). See pg. 3 for HAP Consultation Rates.
- In collaboration with the needs of the organization, the Heartland Clinician will research, develop and provide up to a maximum of 3 mental health presentations within the next 12 months.
- The Heartland Clinician will be available to provide expertise for one Mental Health Day. Examples include: A booth with information, a special morning class, a sermon in coordination with preaching leadership (in the case of a church for CAP), an afternoon or evening seminar on a specific topic.
- The Heartland Clinician will serve in establishing mental health counseling for any staff or church members. Mental health counseling will be provided at the Heartland Office and billed through the patient's insurance or at the HAP rate if insurance is not available. (See pg. 3 for HAP Counseling Rates)
- The Heartland Clinician and the organization leader are encouraged to explore other ways that Heartland can benefit the organization or church ministries.
- Therapist's current office availability is: [Click or tap here to enter text.](#)

## **RECORD KEEPING, LIABILITY INSURANCE & CASELOAD MANAGEMENT**

Heartland Christian Counseling will cover its own liability insurance. Heartland will also cover all its own administrative costs (i.e. furnishings, office supplies, technology needs, etc.). All confidential information (client files and information) will be safely stored on Heartland's own secure electronic clinical record, which the clinician will always oversee.

Therapist will continue with many of his or her own clients, who are currently counseling at the main Heartland Office. Therapist and other clinicians at Heartland Christian Counseling will have openings every month for the contracted organization at Heartland's office or by way of Telehealth as needs may arise. In these cases, Therapist and other Heartland Clinicians will work with the organization directly or in conjunction with staff to set up appointments and coordinate billing (most likely through those members' health insurance plans).

## **STAFF COMMUNICATION & EMERGENCY ARRANGEMENTS:**

Therapist will be introduced to the staff at a date yet to be determined in order to promote the emerging relationship between the organization and the mental health provider. The organization's leader and Clinician will discuss and establish regular consultation meeting times and the most effective means of communication with one another.

In case of an emergency, Clinician will directly contact the organization at XXX-XXX-XXXX immediately with any questions or concerns that may arise related to the organization's space or safety concerns. Similarly the organization's contact can contact Clinician at the office (515) 331-0303 in Urbandale or (641) 628-9599 in Pella if an emergency arises.

**HAP FEE SCHEDULE:**

Proposed Cost of Annual Heartland Assistance Program (HAP)	Under 500 members \$1,000.00 Over 500 members \$1,500.00
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If the organization chooses to pay or offer a co-pay for some of the below services for members, those fees can be directly deducted by the \$1,000 fee (used as annual credit). All services provided by HCC under the HAP program are deducted from your Annual Membership Account. Once your membership account is exhausted (due to use of services), services will continue at HAP rates for the duration of the contractual term. Organizations are encouraged to track how funds are being used under the HAP benefit.

Direct Pay Rates for Mental Health Services WITH the HAP Benefit:

1 Hour Consultation or Counseling with Mental Health or Therapist	\$100.00/ Hour
1 Hour Intake Interview for Individual, Couples or Family Therapy	\$120.00/ Hour (Includes Documentation & Treatment Plan Costs)

The rates listed above reflect a roughly 30-40% discount from the therapist's full fee. See below:

Hourly Rate for Mental Health Services WITHOUT HAP Benefit or Private Insurance

Service	Billed Rates
1 Hour Consultation or Counseling with Mental Health Therapist	\$150.00 - \$175.00
1 Hour Intake Interview for Individual, Couples or Family Therapy	\$200.00 - \$250.00

**\*\* Be advised that all services provided by HCC under the HAP program are deducted from your Annual Membership Account as agreed upon by the organization. Once your membership account is exhausted (due to use of services), services will continue at HAP rates for the duration of the contractual term. Organizations are encouraged to track how funds are being used under the HAP benefit. \*\***

If the organization refers someone who has access to medical health insurance, however, it will most likely be more affordable to bill services through their insurance (this often involves a \$10-\$20 co-pay, due at time of service). If the individual does not have insurance coverage or would not prefer to use insurance, a discount from the organization may be a helpful option.

We find that clients are more likely to attend their counseling appointment if they are actively responsible in paying for a percentage of their own counseling (even under the reduced rate). Therefore,

we encourage organizations to tell their referred clients that they'll be responsible for a HAP co-pay. The organization is encouraging members to be responsible for \$30.00 per session unless another amount is determined to be appropriate and approved by organization contact and the organization.

### **Confidentiality Statement:**

Heartland Christian Counseling will strive to maintain the integrity of this Services Contract by maintaining and promoting confidentiality within the consultation and counseling setting. Heartland Christian Counseling will not disclose personal information of any client without that client's expressed written consent.

### **Review and Termination of Contract:**

Approximately six months from the initiation of this agreement, a **review** of this contract will take place between Heartland Christian Counseling and the organization. During this review, Heartland Christian Counseling and the organization will discuss how HAP is serving the needs of its referred clients. This contract will be reviewed, updated, and applied changes implemented for the rest of the year. At this time the organization may choose to discontinue services. Based on time spent by Heartland in conjunction with the organization, a partial refund may be appropriate.

During the review, the organization and/or Heartland Christian Counseling may terminate this contract, if for any reason one or both parties are not satisfied with the working relationship. Similarly, the contract may be terminated by both parties during an annual review or, if for some other reason, midyear circumstances arise that trigger the dissolution of the contract. Both parties will strive to communicate a two-month notification prior to the termination of this contract.

### **Independent Contractor Status:**

In the performance of services by Heartland Christian Counseling under this agreement, the Therapist is always acting and performing as an independent contractor with respect to the contracted organization. Heartland Christian Counseling shall be entirely and solely responsible for its acts while engaged in the performance of or to transact business.

In addition, the contracted organization shall have no responsibility to pay any taxes on behalf of Heartland Christian Counseling or contribute to any pension plan, social security or other similar program on Heartland's behalf. Heartland Christian Counseling shall not be entitled to receive any benefits that are provided to employees of the contracted organization.

### **Indemnification:**

HCC (Heartland Christian Counseling) and its Therapists shall indemnify and hold the organization from and against any and all liabilities, losses, damages, costs, or expenses, including but not limited to, reasonable attorney's fees and expenses incurred by the organization as a result of a breach of this agreement by HCC and its therapists, or any tortuous, unlawful or unauthorized acts or omissions by

HCC and its Therapists. The organization shall indemnify and hold HCC and its Therapists harmless from and against any and all liabilities, losses, damages, costs, or expenses, including but not limited to, reasonable attorney's fees and expenses incurred as a result of a breach of this Agreement by Organization or any tortuous, unlawful or unauthorized acts or omissions by Organization. The terms and provisions of this paragraph shall survive the termination of this Agreement.

**SIGNATURES:**

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Dr. Heidi Vermeer-Quist  
Psy.D – Clinical Director at Heartland Christian Counseling (HCC)

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Stalin George  
L.M.H.C – Assistance Program Coordinator

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Clinician Name  
– Therapist Liaison

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Organization Contact

This contract is agreed to without amendment on .

This contract is to be reviewed around:

A copy of this signed agreement is to be given to the organization representative.