

LCMHCA Professional Disclosure Statement

Matthew Blevins, MA

Office: (336) 818-0733

Fax: (336) 818-0734

My Qualifications

Matthew Blevins M.A, received his Masters of Arts in Clinical Mental Health Counseling conferred by East Tennessee State University on December, 14, 2023. He has completed 180 total hours of direct counseling experience prior to graduation. Matthew Blevins has obtained a Bachelor of Science in General Psychology which he received Cum Laude on August, 14, 2020.

Restricted License

Matthew Blevins is an LCMHCA (Licensed Clinical Mental Health Counselor Associate) in North Carolina. Matthew Blevins receives supervision from Elizabeth Coleman. His supervisor can be contacted at 336-818-0733 x103 or at elizabeth.jpcs@gmail.com.

Counseling Background

Matthew Blevins has served a variety of populations including both adults and adolescents with presenting concerns such as substance abuse, depression, or anxiety. He primarily operates utilizing methods and interventions from Person-Centered, Cognitive Behavioral, and Solution Focused Therapy. Interventions from other orientations may be utilized based on client need, empirical support, and appropriate training or understanding. Matthew frequently places a focus on the cultivation of therapeutic rapport, CBT psychoeducation, mindfulness and relaxation techniques such as progressive muscle relaxation, and the fostering of the client's self-worth, insight, and the promotion of a holistic life balance.

Session Fees and Length of Service

This counselor will file some insurances. Current eligible insurances include but are not limited to Blue Cross and Blue Shield, Medcost, Medicaid, Medicare, Cigna, Aetna, Tricare, Magellan, North Carolina Healthchoice, CBHA, & Optum. Copays private pays are accepted as cash, check, or credit card. Services are provided at \$185.00 per initial intake assessment or \$160.00 per subsequent counseling session. Session range from 30 to 50 minutes.

Use of Diagnosis

Some health insurance companies will reimburse clients for counseling services and some will not. In addition, most will require that a diagnosis of a mental health condition be given and

indicate that you must have an “illness” before they will agree to reimburse you. Some conditions for which people seek counseling do not qualify for reimbursement. If a qualifying diagnosis is appropriate in your case, I will inform you of and discuss the diagnosis with you before we submit the diagnosis to the health insurance company. Any diagnosis made will become part of your permanent insurance records.

Confidentiality

All of our communication becomes part of the clinical record, which is accessible to you upon request. I will keep confidential anything you say as part of our counseling relationship, with exceptions. Circumstances constituting such an exception are: (A) you direct me in writing to disclose information to someone else, including care providers from other fields, (B) it is determined you are a danger to yourself or others (including child or elder abuse), or (C) I am ordered by a court to disclose information. Beyond these, the utmost care will be taken to safeguard our communication. Information may also be discussed with relevant counseling professionals including my supervisor for the betterment of my practice and your care. These individuals are bound by the same ethical and legal standards of client confidentiality.

Complaints

Although clients are encouraged to discuss any concerns with me, you may file a complaint against me with the organization below should you feel I am in violation of any of these codes of ethics. I abide by the ACA Code of Ethics (<http://www.counseling.org/Resources/aca-code-of-ethics.pdf>).

North Carolina Board of Licensed Clinical Mental Health Counselors P.O. Box 77819

Greensboro, NC 27417 Phone: 844-622-3572 or 336-217-6007 Fax: 336-217-9450 E-mail: Complaints@ncblcmhc.org

Acceptance of Terms

We agree to these terms and will abide by these guidelines.

Client: _____ Date: _____

Counselor: _____ Date: _____