

Welcome to Alliance Counseling Group!

We hope that providing you with this tool will simplify the paperwork process for you! Here are some step by step instructions to help you through the process.

[Instructions For Completing Your Documents Electronically Using A Computer](#)

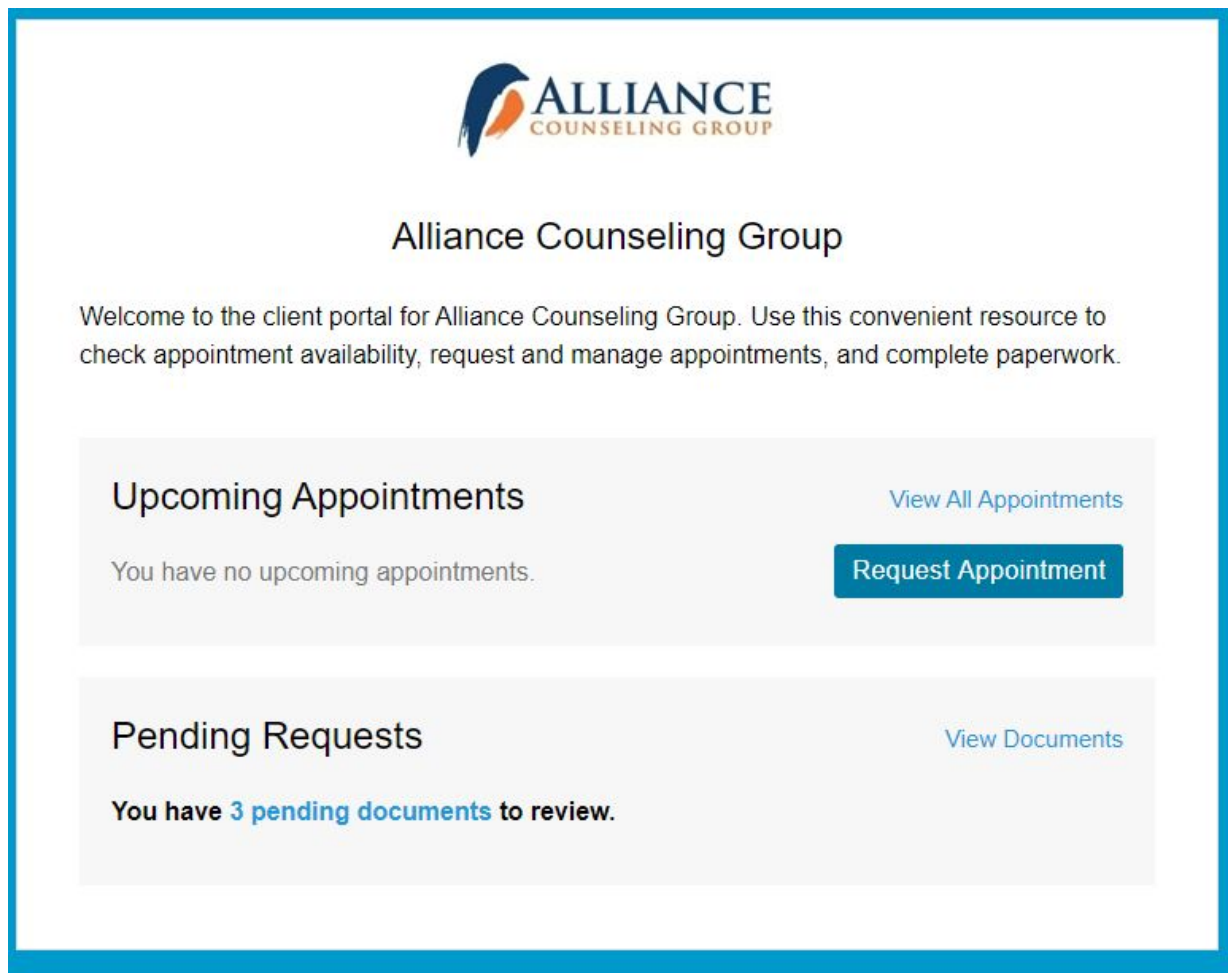
[Instructions For Completing Documents Electronically Using A Device Other Than A Computer](#)

[Instructions For Completing Documents Manually](#)

[Instructions For Uploading Your Cards To The Therapy Notes Portal](#)

Instructions For Completing Your Documents Electronically Using A Computer

You will receive a welcome email inviting you to the Therapy Notes Portal. After you have created a password, Log in using your email and most importantly, **SAVE YOUR PASSWORD!** After doing so, you will see this screen:





Hover then click on your pending documents. You may have a different number of documents depending on what your therapist would like you to fill out.

Alliance Counseling Group

Documents

Pending document request

Sent on June 24, 2020 at 2:22PM EDT

Hint: Save your password!! Download the consent form to fill out using the fillable text blocks, save document and upload back onto the Portal. Please email your therapist the front and back of your insurance cards and drivers license. Thank you.

REQUIRED: ACG New Client Intake and Contract PDF 457KB

Review and Complete

Preauthorization for Payment of Services PDF 113KB

Review and Complete

Telehealth Instructions PDF 53KB

Review

You have no completed documents.



Any of the documents that say 'Review and Complete' are documents you will need to do, ideally **before** your first visit with your therapist. Click 'Review and Complete'.

↓ After clicking Review & Complete, you'll need to download the document. Click 'Download Original Document'. *It will then open in a new browser tab.*

ALLIANCE COUNSELING GROUP

Patient Signature Record

Client Name: _____ Therapist Name: _____

After Reading The Client Contract, Please Answer The Following Statements.
Place your initials after each statement.

Acknowledgement of HIPAA: Your signature below indicates that you have read the HIPPA notice of confidentiality agreement and agree to its terms, and also serves as an acknowledgement that you have been offered and declined or offered and furnished with the HIPPA notice of privacy practices. _____ (initial)

Therapeutic services contract: _____ (initial)

Select one of the following:
☐ As billed to insurance
☐ Paying by Cash/Credit ⇒ If so, our agreed upon session fee is: \$ _____ *
*ask your therapist if you aren't sure

Upload and Sign Completed Document **Download Original Document**

****stop here and proceed to instructions on page 6 if you are using a phone or tablet.****

↓ At that point you can tab through or click on the fillable text blocks to fill in your information, which should look something like this:

Name: JANE DOE
(Full Legal name: First Middle Last)

Preferred Name: JANEY **Birth Date:** 11/11/83
(Month Day Year)

Birth Sex: ☐ Male ☒ Female

***If Minor, Name of Parent(s)/Guardian:** _____

Address: 1234 ACG DRIVE
(Street and Number)
GRANDVILLE MI 49418
(City) (State) (Zip)

Phone: 616-222-0631 **May we leave a message?** ☒ Yes ☐ No
May we text you? ☒ Yes ☐ No
Email: _____ **May we email you?** ☒ Yes ☐ No
*Please be aware that email might not be confidential.

Marital Status: ☐ Single ☐ Partnered ☒ Married ☐ Separated ☐ Divorced ☐ Widowed

JOHN DOE **11/12/83**
Partner's Full Name Date of Birth

Occupation and Employer: _____ ☐ Student

Emergency Contact
Name: JOHN DOE **Relationship:** HUSBAND

(Thank you in advance for completing all necessary information, especially the signature page!
It will help us get all the info we need and prevent you from having to re-do any of the steps.)



Next, you will need to save the document with a different name. For best results, click PRINT, then choose 'Save as PDF' from your print destination:

The screenshot shows the Alliance Counseling Group client intake form on the left and a print menu on the right. The form is titled "Client Information" and contains fields for Name, Preferred Name, Birth Date, Birth Sex, Address, Phone, Email, Marital Status, Occupation and Employer, and Emergency Contact. The print menu on the right has a "Print" button, a "Destination" dropdown menu with "Save as PDF" selected, a "Pages" dropdown menu with "All" selected, and a "Pages per sheet" dropdown menu with "1" selected.

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Client Information

Name: JANE DOE
(Full Legal name: First Middle Last)

Preferred Name: JANEY Birth Date: 11/11/83
(Month Day Year)

Birth Sex: ☐ Male ☒ Female

*If Minor, Name of Parent(s)/Guardian: _____

Address: 1234 ACG DRIVE
(Street and Number)
GRANDVILLE MI 49418
(City) (State) (Zip)

Phone: 616-222-0831 May we leave a message? ☒ Yes ☐ No
May we text you? ☒ Yes ☐ No

Email: _____ May we email you? ☒ Yes ☐ No
*Please be aware that email might not be confidential.

Marital Status: ☐ Single ☐ Partnered ☒ Married ☐ Separated ☐ Divorced ☐ Widowed

JOHN DOE 11/12/83
Partner's Full Name Date of Birth

Occupation and Employer: _____ ☐ Student

Emergency Contact

Name: JOHN DOE Relationship: HUSBAND

Address: 1234 ACG DRIVE
(Street and Number)
GRANDVILLE MI 49418 Phone: 616-222-0831
(City) (State) (Zip)

1

Print 9 pages

Destination Save as PDF

Pages All

Pages per sheet 1

Then change the file name and save as type PDF File.

The screenshot shows a "Save As" dialog box. The "File name:" field contains "REQUIRED--ACG-New-Client-Intake-and-Contract-jane doe". The "Save as type:" dropdown menu is set to "PDF File". There are "Save" and "Cancel" buttons at the bottom right.

File name: REQUIRED--ACG-New-Client-Intake-and-Contract-jane doe

Save as type: PDF File

Save Cancel



Follow the on screen instructions to upload your newly named and saved document to the portal (as seen below). You will have already signed the document so the next step is optional. You can either check the box and hit next to proceed...

Upload the completed document to sign and send to your practice. Once the document is uploaded, you will be prompted to electronically sign it. If you have already physically signed the document, check the box below.

File: REQUIRED--ACG-New-Client-Intake-and-Contract-jane doe.pdf x

☐ I have physically signed the document and do not need to electronically sign it.

Next Cancel

- OR- leave the box unchecked and sign the document electronically on the portal either by drawing or using the system generated signature.

Signed By:

Draw Signature Create Signature from Typed Name

Jane Doe

Apply Signature and Send Document Cancel

After hitting the 'apply signature and send document' button, you will see the following screen and then you will click on the 'You have 2 documents pending action' and proceed using the same process described to fill out additional documents.

Alliance Counseling Group

Your uploaded document and signature have been submitted. [You have 2 documents pending action.](#)

This process is best done using a computer but can also be done using your phone or tablet.

Verizon 4:49 PM 66%

Done therapyportal.com

ALLIANCE COUNSELING GROUP

Patient Signature Record

Client Name: _____ Therapist Name: _____

After Reading The Client Contract, Please Answer The Following Statements. Place your initials after each statement.

Acknowledgement of HIPAA: Your signature below indicates that you have read the HIPPA notice of confidentiality agreement and agree to its terms, and also serves as an acknowledgement that you have been offered and declined or offered and furnished with the HIPPA notice of privacy practices. _____ (initial)

Therapeutic services contract: _____ (initial)

Select one of the following:
☐ As billed to insurance
☐ Paying by Cash/Credit → If so, our agreed upon session fee is: \$_____. *
*ask your therapist if you aren't sure

Insurance, billing and consent for services: _____ (initial)

Teletherapy Informed Consent: I hereby consent to engage in online counseling services with _____ (therapist) through Alliance Counseling Group _____ (initial)

I have read and agreed to the terms and conditions of this document. I acknowledge that I am the client or the legal representative of the client, and I agree that my signature is a legally binding agreement.

Client Signature: _____ Date: _____
Parent/Guardian Signature (if client is under 18 years)

ALLIANCE COUNSELING GROUP

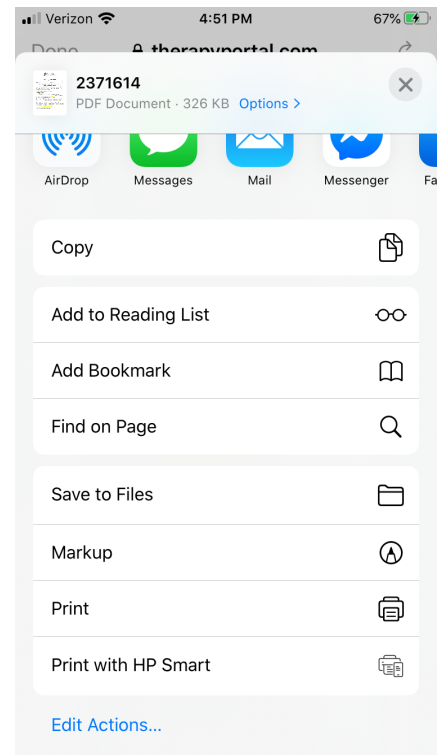
Client Contract

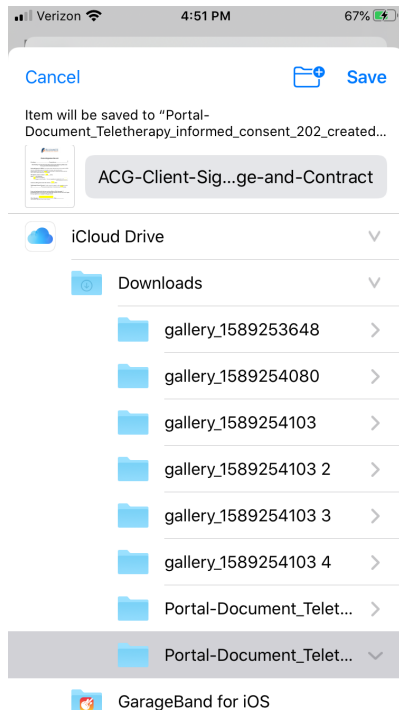
Instructions For Completing Documents Electronically Using A Device Other Than A Computer

*These instructions are based on using an iPhone but other phones/devices have similar capabilities.

← The document will open. *You will need to save it to your device before you are able to fill in the text boxes.* Hit the box with the arrow at the bottom of the browser page.

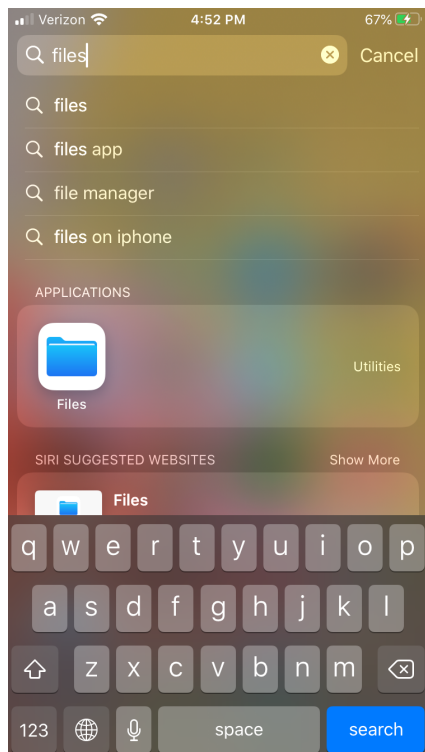
You will see the following choices...select 'Save to Files': →





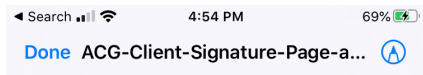
↑ Once you see where your file will be saved, you will then hit Save in the upper right corner.

↓ Next, you will go to Files to open it in that location (it should be the most recent document).





You can then proceed with filling out the required fields.



Patient Signature Record

Client Name: Jane Doe Therapist Name: David Burke

After Reading The Client Contract, Please Answer The Following Statements.
Place your initials after each statement.

Acknowledgement of HIPAA: Your signature below indicates that you have read the HIPPA notice of confidentiality agreement and agree to its terms, and also serves as an acknowledgement that you have been offered and declined or offered and furnished with the HIPPA notice of privacy practices. JD (initial)

Therapeutic services contract: JD (initial)

Select one of the following:

☒ As billed to insurance

☐ Paying by Cash/Credit => If so, our agreed upon session fee is: \$ _____ *

*ask your therapist if you aren't sure

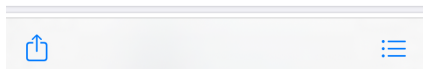
Insurance, billing and consent for services: JD (initial)

Teletherapy Informed Consent: I hereby consent to engage in online counselling services with David Burke (therapist) through Alliance Counseling Group. JD (initial)

I have read and agreed to the terms and conditions of this document. I acknowledge that I am the client or the legal representative of the client, and I agree that my signature is a legally binding agreement.

Client Signature: Jane doe Date: 6/26/2020

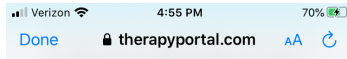
Parent/Guardian Signature (if client is under 18 years)



You will then go back into the Therapy Notes Portal page in your browser. The unsaved document may still be there. If so, hit the 'back' arrow to go back to the upload page. Make sure that the document you are uploading is the correct document as requested (the file name shows after the word Upload:).



Next, Choose File



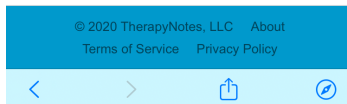
Upload: ACG Client Signature Page and Contract

Upload the completed document to sign and send to your practice. Once the document is uploaded, you will be prompted to electronically sign it. If you have already physically signed the document, check the box below.

File:

no file selected

☐ I have physically signed the document and do not need to electronically sign it.





Then Select Browse and your recent documents will show up.

Done therapyportal.com AA ↺

Upload: ACG Client Signature Page and Contract

Upload the completed document to sign and send to your practice. Once the document is uploaded, you will be prompted to electronically sign it. If you have already physically signed the document, check the box below.

File:

Choose File no file selected

☐ I have physically signed the document and do

Take Photo or Video

Photo Library

Browse

Cancel



Follow the on screen instructions to upload your saved document to the portal (as seen below). You will have already signed the document so the next step is optional. You can either check the box and hit next to proceed...

Upload the completed document to sign and send to your practice. Once the document is uploaded, you will be prompted to electronically sign it. If you have already physically signed the document, check the box below.

File: REQUIRED--ACG-New-Client-Intake-and-Contract-jane doe.pdf

☐ I have physically signed the document and do not need to electronically sign it.

Next Cancel

- OR- leave the box unchecked and sign the document electronically on the portal either by drawing or using the system generated signature.

Signed By: Jane Doe

Draw Signature Create Signature from Typed Name

Jane Doe

Apply Signature and Send Document Cancel

Instructions For Completing Documents Manually

If you are not able complete the document electronically, you can do this:

PRINT document

Fill out the printed document

Scan* and save your document, then upload it to the therapy notes portal.



****This is preferable to a photo so that we can read the document clearly.***

There are multiple ways to scan your documents if you do not own a scanner!







iPhone Users

With Notes, you can scan documents and add a signature or manually sign a document on your iPhone, iPad, or iPod touch.

How to scan documents on your iPhone, iPad, or iPod touch using the Notes app:

1. Open a note or create a new note.
2. Tap , then tap Scan Documents.
3. Place your document in view of the camera on your device.
4. If your device is in Auto mode, your document will be automatically scanned. If you need to manually capture a scan, tap  or one of the Volume buttons.
5. Drag the corners to adjust the scan to fit the page, then tap Keep Scan.
6. You can add additional scans to the document or tap Save when you're done.

Android Users

1. Open the Google Drive app .
 2. In the bottom right, tap Add.
 3. Tap Scan .
 4. Take a photo of the document you'd like to scan.
Adjust scan area: Tap Crop .
 - Take photo again: Tap Re-scan current page .
 - Scan another page: Tap Add .
5. To save the finished document, tap Done .

Instructions For Uploading Your Cards To The Therapy Notes Portal



In order to upload your ID and Insurance cards to the portal please scan* your cards and save the file to your device.

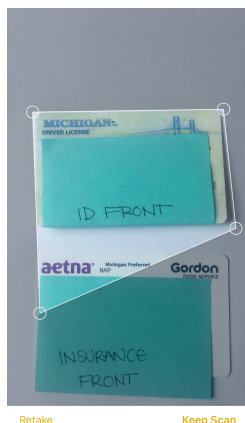
If you do not have a scanner, follow these simple steps:

****This is preferable to a photo so that we can read the document clearly****


iPhone Users

How to scan documents on your iPhone, iPad, or iPod touch using the Notes app:







1. Open a note or create a new note.
2. Tap , then tap Scan Documents.
3. Place your cards in view of the camera on your device. (for best results place them on a blank piece of paper).
4. If your device is in Auto mode, your document will be automatically scanned. If you need to manually capture a scan, tap  or one of the Volume buttons. NOTE: It may appear that only one of the cards will be scanned. Regardless, hit the button to take the image anyway and then use the circles on the corners to drag a rectangle in order to include both cards. It may look something like this:



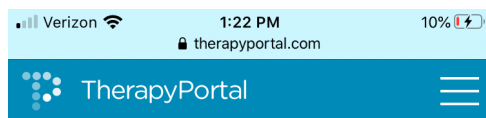
 Then tap Keep Scan.

5. Flip your cards over to scan an image of the back side and tap .
6. Tap Save in the bottom right corner when you're done.

Android Users

1. Open the Google Drive app .
 2. In the bottom right, tap Add.
 3. Tap Scan .
 4. Take a photo of the document you'd like to scan.
Adjust scan area: Tap Crop .
 - Take photo again: Tap Re-scan current page .
 - Scan another page: Tap Add .
5. To save the finished document, tap Done .

UPLOADING YOUR DOCUMENT TO THERAPY NOTES:



Alliance Counseling Group

Insurance and ID Upload Request

Request for Jane ACG Doe Sent on June 29, 2020 at 1:21PM EDT

Instructions From Practice: Please review and complete the document, then upload below.

Original Practice Document:

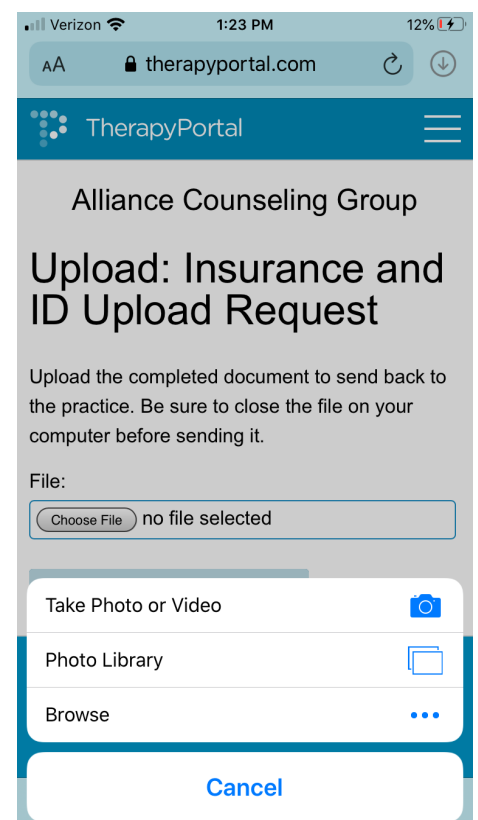
 [Insurance and ID Upload Request](#) DOCX 300KB

[Upload Completed Document](#)

[Download Original Document](#)

← Once your cards are saved to one document, return to the Therapy Portal page in your browser. Tap [Upload Completed Document](#).

Next, look in your photo library to select your scan of your cards then hit [Done](#) in the upper right corner of your photo library.



Finally, tap [Upload and Send Document](#) and it will go to your Therapy Notes Portal account.

REQUIRED: Insurance and ID Request: Front

Upload the completed document to send back to the practice. Be sure to close the file on your computer before sending it.

File:



98376F5E-A21D-4BAF-806F-

B3D11734D68D.png ×

[Upload and Send Document](#)

[Cancel](#)

THANK YOU!