



Tango & Co.

Therapy

Where resilience and connection grow

Counselor Disclosure Statement

Carrie Soto Erickson, MS, LMFT

Carrie S. Erickson, LMFT is in private practice offering Licensed Marriage and Family Therapy to individuals, couples, and families. She is committed to creating an environment where each person can learn, communicate, and thrive, even in the face of difficult circumstances.

About Carrie S. Erickson, LMFT

Carrie S. Erickson, LMFT is a state of Washington Licensed Marriage and Family Therapist (#LF00002191). She holds a Bachelor's degree in Communication and Legal Studies from Pacific Lutheran University and a Master's degree in Marriage and Family Therapy from Seattle Pacific University. She is a clinical member of the American Association for Marriage and Family Therapy and has worked with youth and their families for over twenty years across juvenile justice rehabilitation, residential care, youth outreach, mental health agency work, and private practice.

Her clinical expertise spans youth, adults, relationships, and family therapy, including mental health assessments, diagnosis, and individually tailored treatment plans. Carrie S. Erickson, LMFT has extensive experience with high-risk youth and families presenting with criminal, social, emotional, and behavioral issues. She specializes in women's health, LGBTQIA+, BIPOC communities, and infertility.

Her counseling philosophy is client-centered and systemic strength-based. She believes healing happens through a collaborative and empowering therapeutic relationship, and is passionate about incorporating a client's spirituality as a foundation for growth and re-creation.

Carrie S. Erickson, LMFT is trained in Dialectical Behavioral Therapy (DBT) and has co-led DBT skills groups for adolescents with mental health disorders and/or suicidal and self-harming behaviors. Additional training areas include: multicultural counseling, pre-marital/marital/relationship issues, grief/loss, PTSD, eating disorders, bipolar disorder, borderline personality disorder, anxiety, depression, sexual abuse, addiction, psychopharmacology, crisis intervention, divorce/separation, gender identity, and sex therapy.

It is Carrie S. Erickson, LMFT's philosophy that every person deserves the earliest interventions possible to live as happily and healthily as possible — without judgment or shame.

Fees and Protocols

Session Type	Fee
Individual Session (50–57 min)	\$185
Marital / Relationship Session	\$205
Family Session	\$220
Intake / Assessment (one-time)	\$235

Cancellations: Carrie S. Erickson, LMFT requires **48 hours notice** to cancel or reschedule. Late cancellations and no-shows will be charged the full session fee. Insurance does not cover missed appointments. Crisis situations and illness are handled collaboratively.

Payment: All fees are due at the time of service. Carrie S. Erickson, LMFT does not bill insurance directly — clients are solely responsible for payment each session. Payment options and Telehealth links are provided prior to your intake. If you are experiencing financial hardship, please discuss installment options in a timely manner.

Telehealth Informed Consent

Carrie S. Erickson, LMFT offers both in-person and Telehealth sessions. All Telehealth platforms comply with HIPAA and Washington State (RCW 70.02) requirements. A secure Wi-Fi connection and a private, confidential space are required.

Licensure

Carrie S. Erickson, LMFT is licensed in Washington State (License #LF00002191) under RCW 18.19, regulated by the Washington State Department of Health, and governed by WAC 246-809 and the AAMFT Code of Ethics. Licensure does not guarantee specific outcomes. A copy of RCW 18.130.180 is included with this paperwork.

Confidentiality and Its Limits

Everything shared in therapy is confidential under federal law (HIPAA, 45 CFR Parts 160 & 164) and Washington State law (RCW 70.02). As an LMFT, Carrie S. Erickson, LMFT also maintains heightened protections for **psychotherapy notes** (process notes kept separately from the clinical record), which require a separate written authorization for release.

Exceptions — disclosures required or permitted by law:

- **Child abuse or neglect (RCW 26.44):** Carrie S. Erickson, LMFT is a mandated reporter and must report reasonable cause to believe a child is being abused or neglected.
- **Vulnerable adult abuse (RCW 74.34):** Suspected abuse or exploitation of a vulnerable adult must be reported to Adult Protective Services.
- **Duty to warn / imminent danger (RCW 71.05.120):** If you disclose a serious and imminent threat of harm to an identifiable person, Carrie S. Erickson, LMFT may notify law enforcement or the potential victim.
- **Court order:** Records may be released if ordered by a court of law.
- **Health oversight:** Disclosure may be made to licensing boards conducting authorized oversight.

Minor Confidentiality (RCW 71.34.530): Minors age 13 and older may consent to outpatient mental health treatment independently. When a minor does so, their records are confidential from parents and guardians and may not be released without the minor's written consent, except as required by law. These rights are discussed at intake.

HIPAA Notice of Privacy Practices — Summary

A full standalone Notice of Privacy Practices is provided as a separate document. Your key rights under HIPAA and RCW 70.02:

- **Access your records** with 72 hours notice (excluding weekends).
- **Request amendments** to information you believe is inaccurate.
- **Accounting of disclosures** made outside treatment, payment, or operations.
- **Request restrictions** on how your information is used or shared.
- **Confidential communications** — contact at a specific address or number.
- **Paper copy** of the full Notice of Privacy Practices at any time.
- **File a complaint** with Carrie S. Erickson, LMFT or HHS OCR (1-800-368-1019 | www.hhs.gov/ocr) without retaliation.
- **Psychotherapy notes** require a separate written authorization for release.

Records

Documentation is required by Washington State law (RCW 70.02) and insurance companies. Insurance requires a diagnosis before paying on a claim. Records from other sources will be provided in writing at your request.

To review your records, **72 hours notice** is required (excluding weekends). You have the right to request corrections; a copy will be placed in your record. Carrie S. Erickson, LMFT does not attend court or procure documents for court proceedings.

Consent to Treatment

I acknowledge that I have received, read, and understand the information about Carrie S. Erickson, LMFT's practice as required by Washington State Law (RCW 18.19) and federal HIPAA regulations, and that all my questions have been fully answered.

I consent to take part in treatment and agree to play an active role in the process. I understand that no promises have been made about treatment outcomes. I may stop attending sessions at any time; if I wish, Carrie S. Erickson, LMFT can provide referrals to qualified therapists. I remain responsible for payment of services already received.

I am responsible for my own actions, choices, and safety during therapy. Carrie S. Erickson, LMFT has the right to terminate the therapeutic relationship at any time in good professional practice.

I must cancel appointments at least **48 business hours** in advance. Failure to cancel or no-shows will be charged the full session fee. I understand that Carrie S. Erickson, LMFT does not work with any insurance companies and that I am solely responsible for payment at the beginning of each session. Non-payment may result in discontinuation of services.

Minor clients (age 13–17 — RCW 71.34.530): You have the right to consent to outpatient mental health treatment independently. Your records will remain confidential from parents or guardians unless you provide written consent or disclosure is required by law.

Availability and Crisis Coverage

Office hours are **Mondays and Fridays, 11:00 AM – 6:00 PM**. Phone availability follows the same schedule. Carrie S. Erickson, LMFT returns calls within 48 hours.

24-hour crisis coverage is not provided. For life-threatening emergencies call **911**. For after-hours crisis support call the **Crisis Clinic at 211** and notify Carrie S. Erickson, LMFT at your next opportunity.

Liability

Carrie S. Erickson, LMFT's office is located at **22443 SE 240th Street, Suite 202, Maple Valley, Washington** — an independent private practice. Questions about any material presented here may be directed to Carrie S. Erickson, LMFT.

Signatures

Please sign below to indicate that you have read and understand this information, have been shown Washington State Department of Licensing client rights (RCW 18.19), have received a copy of professional conduct standards (RCW 18.130.180), and have received the Notice of Privacy Practices (HIPAA 45 CFR §164.520). A photocopy is available upon request.

By signing this form I agree with and understand the information above.

Client #1 signature

Date

Client #1 printed name

Client #2 signature (couples / family)

Date

Client #2 printed name

Minor client signature (age 13 or older — RCW 71.34.530)

Date

Parent or guardian signature and relationship to client

Date

Printed name

I, Carrie S. Erickson, LMFT, have discussed the issues above with the client and/or their parent, guardian, or representative. My observations give me no reason to believe this person is not fully competent to give informed and willing consent.

Carrie Soto Erickson, M.S., LMFT — Licensed Marriage and Family Therapist

Date

Washington State Law — Violations (RCW 18.130.180)

The Washington State Department of Health requires all counselors to inform their clients that the following are violations of the law:

1. The commission of any act involving moral turpitude, dishonesty, or corruption relating to the practice of the person's profession, whether the act constitutes a crime or not;
2. Misrepresentation in obtaining a license;
3. Advertising that is false, fraudulent, or misleading;
4. Incompetence, negligence, or malpractice which results in injury to a patient;
5. Suspension, revocation, or restriction to practice counseling;
6. The possession, use, prescription for use, or distribution of controlled substances or illegal drugs;
7. Violation of a state or federal statute or rule that regulates counselors, including rules defining standards of practice for certified counselors;
8. Failure to cooperate with the disciplining authority;
9. Failure to comply with an order issued by the disciplining authority;
10. Aiding or abetting an unlicensed person to practice when a license is required;
11. Violations of rules established by any health agency;
12. Practice beyond the scope of practice as defined by law or rule;
13. Misrepresentation or fraud in any aspect of the conduct of the business or profession;
14. Failure to adequately supervise auxiliary staff to the extent that the consumer's health or safety is at risk;
15. Practicing counseling or hypnotherapy while suffering from a contagious or infectious disease in a way that would pose a serious risk to public health;
16. Promotion for personal gain of any drug, device, treatment, procedure, or service that is unnecessary or has no acceptable benefit to the client;
17. Conviction of any gross misdemeanor or felony relating to the practice of the person's profession;
18. The procuring, or aiding or abetting in procuring, a criminal abortion;
19. The offering, undertaking, or agreeing to cure or treat disease by a secret method, procedure, or treatment;
20. The willful betrayal of a practitioner-patient privilege as recognized by law; Violation of Chapter 19.68 RCW;
21. Interference with an investigation or disciplinary proceeding by willful misrepresentation of facts before the disciplining authority or its authorized representative;
22. Misuse of alcohol, controlled substances, or illegal drugs;
23. Abuse of a client or sexual contact with a client;
24. Acceptance of more than a nominal gratuity where a conflict of interest is presented, based on recognized ethical standards.

Also, the Washington State Department of Health wants you to know:

Counselors practicing counseling for a fee must be registered or certified with the Department of Health for the protection of public health and safety. Registration does not include recognition of any practice standards, nor necessarily implies the effectiveness of any treatment. (WAC 246-810-031)

The purpose of the Counselor Credentialing Act is: (A) To provide protection for public health and safety; and (B) to empower the citizens of the state of Washington by providing a complaint process against counselors who commit acts of unprofessional conduct. (WAC 246-810-0301)

If you have concerns about your counselor, you are encouraged to first discuss them directly. Many issues can be resolved through open communication. You may also contact:

Washington State Department of Health — Counselor Programs

P.O. Box 47869, Olympia, WA 98504-7869 | Telephone: (360) 664-9098