

How to create a thriving fee-for-service private practice outside managed care

Joe Bavonese, Ph.D. interviews Ofer Zur, Ph.D.

Joe: Welcome, everyone, to our webinar, today. Dr. Ofer Zur will be presenting on how to create a thriving fee-for-service private practice, outside of managed care, despite the economy, and all the things we've been hearing about since 2008's recession. Today's a good day, given the stock market is in another one of its tailspins, Dr. Zur, to give us some advice on this important topic. Mel and I know that many people have a desire to have a fee-for-service practice, outside of managed care, but have been finding it more difficult to do so. Take it away, and enlighten us all.

Ofer Zur Ph.D.: Okay. Thank you Joe. Thank you Mel. In fact, tools that therapists have used over the years vary from the stock market to people that don't have money, to people that don't value us. Excuses, excuses. I think that the recession is really irrelevant to everything we are talking about today, because therapists use it as an excuse. People are still doing their breast augmentation, as we speak. They do cosmetic surgeries. There are probably, as we speak, 10s of millions of people paying for pornography. If you look outside, people are driving pretty nice cars, here in San Pedro. We're seeing this all over the world. We just came back from Europe.

Relatively, what we are asking in our practices is really not at the level of houses or even luxury cars or cosmetic surgery. We are at the level of what people can afford. You go to the mall, you do see women still buying cosmetics, and buying jewelry, and buying clothes. I go beyond the excuses, and try to help people overcome the reason why they don't have a fee-for-service. I've been lecturing about fee-for-service since the early '90's. Thousands of therapists have converted out of managed care, they don't waste their time with so many immoral, and unfair, and unjust, and unhelpful systems, that's mostly managed care not all of them, really, to pursue our vocation, to pursue our calling. We are being controlled and managed.

I really don't care what the stock market is doing. I think the recession of 2008 has not effected the people I've trained, as well as my practice. Let's take a dive, and see what it takes. A quick note, if you go to

zurinstitute.com, you'll find a whole bunch of materials. Online marketing guide will not be out until a couple of weeks. My daughter is finishing it. We have attached a 10% discount code. It's UCB88.

Let's see. What does it take to become a successful therapist? We'll start with the five major areas of characteristics of successful therapy. When you do therapy, when you conduct therapy, the most important thing that the people would like to have is a connection with us. That means they want to see an emotionally healthy person. They would like you to be appropriate. Somebody in the session, or the first call, will say something. You'll say, "What? Did he say that?"

Be flexible. Sometimes, clients would like to go on a walk and talk. Sometimes, they would like a home visit. Be flexible with them. If they want to meet in the home, I think it very often can be very therapeutic, very clinically appropriate, so do that. Show up. Be a full person. I think, as we're moving to the 21st century, an increased demand on us to be more transparent and more will show up. This part of what happened with changes with the internet, which I'll talk later on. We talk about the first characteristic is be personal.

Then moving to run a fee-for-service private practice is really like running a small business. You need to learn that this is not anything we learn at school, how to manage time, money, how to do billing. If you're not comfortable with any of that, doing your marketing, just hire somebody. We're used to running a business. We're not used to running a marketing campaign. I must admit, until a few months ago, I didn't even have QuickBooks. I thought that QuickBooks is an animal running in the Savanna, in Africa. Finally, 30 years later, I have finally QuickBooks accounting system. Again, I wasn't trained, in school, to have any accounting system. I got somebody to do that. He took a total of a couple of weeks to convert me to QuickBooks. You get help. That means you pay for help. It's part of running a business.

You need to have the kind of personality for that. I just spent three weeks in Israel and in Greece and in Crete. This was a time that the money from my private practice didn't flow in. It's the package deal, to have the kind of the personality for that, that sometimes you won't make money on vacation. It's the personality of running a small business. We can talk more about it, but, at least, you need to think "Is it for me?"

We come to clinical skills, you need to make a decision, or to know what mode you are working with. If you decide to be a generalist, you really need to learn how to work with people with two principles: how to work

with people in intermittent long-term therapy, that means you see people over the long-term, and you need to learn how to work outside the DSM. When you work with people in issues of love, and relationship, and parenting, and aging, you barely have a diagnosis. You may not even have a diagnosis, you just have a focus of treatment. You don't need to have a diagnosis to be within the standard of care. I'm, right now, almost 30 years in practice, and there are people I've been seeing for a quarter century. I've seen them as a couple, in a difficult divorce, and I saw them with the new partners, and the new partners and them have babies, and then I saw their parents, when the parents move to old people's home, then the brother died. They'll come in and out. In a 25 year period, they'll come in and out of therapy, without the big deal of termination, without decomposition about termination and restarting. It's coming in and out. I teach them how to identify that sometimes they just need a tune up.

The models that they use for intermittent long-term life issues, like the dentist where we go and get a check up on our teeth on a regular basis or a mechanic where we check the oil before the car is broken, before the engine stops. It's a preventative way to do intermittent long-term in therapy. You can imagine to reduce your need for marketing, because you are working with that group of people, and their parents, and their children. Now, I see, actually, the children of clients that have started 20 years ago. Now, I see even one family in three generations. They'll come together, and they'll come separate, into the therapy session. Now, the grandchildren are, actually, in therapy, not because they're broken, just because to have a coach about how to live their life in a meaningful and healthy way.

The DSM has become irrelevant to this kind of work, not that I'm a great believer in the DSM. I think most of it is just a scam for the pharmaceutical companies. It's money. There's some validity. There's some aspects of the DSM, but generally, it's just a money maker, for some kind of corporate pharmaceutical companies and psychiatric industry.

Working with people with issues of love, parenting, aging, chronic illness, depression, anxiety, existential meaning and depth, throughout their lives, what are the issues of their calling and vocation. Get training in positive psychology. Get training in a basic way of dealing with anxiety and depression, and existential psychology, as well as relationships, and you can do this work, if you just put your mind to it, educate yourself, and then educate the client. Then, if you choose to have a different approach, rather than a generalist, you can become a specialist. They are not conflicting with each other. Then, you need to choose what

population, or market. Are you going to do recreation? Are you going to do eating disorder, PTSD, ADHD, blah, blah, blah, whatever it is. [inaudible 00:10:16] the market, you learn how to penetrate.

Joe: Are you saying you could have fee-for-service with generalists or specialists?

Ofer Zur Ph.D.: Yes.

Joe: Okay.

Ofer Zur Ph.D.: Absolutely.

Joe: Okay.

Ofer Zur Ph.D.: As the internet addiction part coming into my practice more, I see it as a fee-for-service. When parents are freaked out about the children using Facebook, YouTube, pornography, gaming, they'll pay. They'll pay, without a blink. I also see people, throughout their lives, around issues of relationships, life, death, transition, caretaking of parents, etc. You need to know what mode you are working with. In marketing, this would be different for different modes, because you are targeting the population in a different way. They are different, but you can act definitely, on both ways.

Joe: Ofer, someone's asking "Is it more lucrative to be a specialist, or a generalist?"

Ofer Zur Ph.D.: It's the same. If you're good, you can make a quarter million dollars a year, through time, or whatever you want to get close to in this day and age, either way. It's a good question. First, how you come into personality. Some people just cannot hold the big picture, very well. Some people just like specificity, and the expertise that come in one area. It's really either way, fine. Go ahead, Joe.

Joe: Someone else had asked "Is it feasible to be both a generalist and a specialist. Can you have one or two specialty areas, and the rest of your practice be generalist?"

Ofer Zur Ph.D.: Absolutely. That's what I have. I am, definitely, a generalist, and then I have different specialties, as well. I have many specialties, as well as, being general.

Joe: Someone else asked "Is it harder to market yourself as a generalist?"

Ofer Zur Ph.D.:

It's different, not harder. Let's go on about the next aspect of successful therapy. Number four. You need to be involved in the community. If you are just at home, not doing much, and not contributing in writing or in person, it would be hard for people to get to know who you are, and we'll talk about websites, as well, later on. When I moved to Sonoma, in Northern California, the wine country, back in 1988, I gave one lecture on fighting and loving, with my friend, Sam Keen. We moved to the town together. We gave the lecture on fighting and loving. How can you argue. All people either love, fight, or do both. We want to teach them how to fight well, to argue well, so they can love well. It was attended by more than 100 people, it's a small town, because it's one of the topics that we taught. Ever since, I have a full private practice, with a waiting list. It took me six, seven, months. I did some other marketing efforts, but this one, by itself, I got the brochure around town about Dr. Zur was going to talk about relationships. This made me an expert, regardless of whether I was an expert, or not. I was active.

I'm going to do a presentation to some of the schools in my community about how to deal with the internet addiction, and with digital natives and digital immigrants. Not that I need more referrals, but this is definitely going to generate tons of referrals. I do it in two local towns, where I live here right now. I'm visible as an expert. I am active on committees. You may want to be active on committees, where people know who you are, in the health and medicine arena, even in recreation, the rotary clubs, whether you're involved in politics, you present yourself as an expert. We'll talk a little bit more about marketing, in a few minutes.

The last one of the successful therapist, you need to diversify your activities and interests. Do some kind of exercise, or Pilates, or yoga. Take time off and create balance between work and play, honor mind, body, spirit, between connection with God, with family, friends, or solitude, time offline, time online, time to be with nature, etc. You need to find a way to balance your life in a healthy way.

Let's now go the million dollar question. I want each participant to take 30 seconds. When you think about money, what is the first thing that comes to mind? People say, or quickly type what is the first thing that comes to mind. Joe, you can read it to me.

Joe:

Fear, freedom, security, anxiety, poverty, not enough, don't have enough, going on vacation, options, lack of, part fun, unlimited, I want a lot. Got a nice range.

Ofer Zur Ph.D.:

Excellent. This is one thing to do. For a lot of therapists, it brings a lot of anxiety. We did not go to school to have a business administration degree. We have this phobia about money. We don't know how care and profit can be compatible. It's a huge issue among therapists. My mother was a famous therapist in Israel. She never charged for anybody. She saw people in our living room. Never charged a penny, from anybody. She was a professor at the University of Tel Aviv. Never charged. I remember that me charging \$2 per session, as an intern, was a betrayal of my mother's vision of what therapy is about. I felt guilty in betraying her legacy. It took many years of therapy, really, to restructure and to rethink my relationship to money. Without a blink, I'll charge \$200 an hour. I feel it's cheap.

It requires some work about our relationship to money, because the way we started today, if I'm looking at a stock market, it's just an excuse. People don't have money. Talk to the pornographers and talk to the cosmetic industry, and talk to the jewelry and clothing, women's clothing, and you'll see it's stupid, it's idiotic, and it's not true that people don't spend money. Even in time of recession, it hard with the houses. I don't want to minimize hardship, by no means. Therapists use recessions and other things just as an excuse, instead of going and countering the relationship, and facing the relationship to money, which is not very healthy, and I was one of them. This has to deal with my guilt about charging \$2 an hour. Now, I'm adding two zeros to that, and I feel just fine.

Then, the next question I want people to ask themselves, as part of the journey, before even we go to marketing, before we can do a private practice, 'How and who and what shape is your relationship to money, to profit, to wealth?' As I shared with you a second ago, it was my relationship to my idealistic mother, and father who was a union organizer. I came from this highly socialistic family with care rather than money. This is what shaped my relationship to money and profit. Profit is wrong. Wealth is even worse. Money's dirty. This is what I came from. Without rejecting a lot of the values that I grew up with, I needed to change a lot of things.

I won't ask people to tell me the story of their lives, but I want something to think on. Let's see a little bit about calculations next.

Let's say that you want 150,000 a year. It comes to about 1250 a month, for the 20 hours a week, then you take a six weeks vacation. Okay. Let's see what entails you doing that? Then you write talk about lifestyle. I'm talking about some samples of my travel. The bottom line is where I was

just last week. To the left of it is when my wife and I went China, after I told you Singapore, last year. Two years earlier, I was on the glacier in Alaska. Six years ago, I climbed Kilimanjaro, with my son and my adopted daughter. This is a balanced life.

Okay. Go back to the numbers. You want \$150,000 a year, at 20 hours a week, six weeks vacation. It comes to about \$160 a session, however, you don't work for the whole time. Then we give some session for free. Sometimes, it's low fee scale, as well. Let's say two sessions out of the 20 are free. Four sessions at \$70. The rest, in order to get \$160 average, comes to about \$190, or \$200. Everybody freaks out. \$200 is too much. People will not pay. You get into your neurotic self. Don't make excuses. Talk to Joe about your relationship to money. Talk to me about your relationship to money. Consult with me. Talk to your therapist, but the therapist should not be as bad as you are, perhaps, about issues of money.

When it comes to fees, I remember, when Gary came to therapy. He assigns the office policies, never really asked about the money. At our first session, he paid the \$200. He went away. He came to the next session. From his bio, I caught the fact that he saw another therapist in town, who's actually got a lot more therapy than I am, more trained than I am. He's also a PhD. I got permission to talk to the other therapist. This other therapist and I talked. He said, "Listen, I'm going to give you the clinical picture. One thing with Gary, it took us three months to set the fee. Gary has a huge issue with his money." I said "How much did he end up paying you?" He said, "He end up paying me about \$65 a session." I couldn't wait until next time to meet Gary. I said, "Gary, what happened? You pay \$65 a session. It took you three months to set the fees. Did anything change about your life? You got a job? Did you win the lottery? You're paying me \$200, without even questioning it." Gary kind of shook his head, and looked confused a little bit, and surprised. He told me, "I never thought about it." What's the moral of the story?

Joe: Moral of the story sounds like, like you said, "Don't be neurotic about it. Charge what you really are worth, and the people will come."

Ofer Zur Ph.D.: The people will come. You are absolutely right. It wasn't about Gary, it was about the other therapist. When he got to talk to me, and he didn't see that I'm neurotic about it, and I feel I deserved \$200, he paid me \$200. When the other therapist yanked him around for three months, to end up at \$65. It's how you exude. How do you present yourself? You need to do some work on yourself. Or you can just lament with your

excuses, about the economy, etc. The pornographers and cosmetic surgeries don't complain, they just charge. They do very well.

When it comes to fees, I have some free articles online. On my website, I have an online course for CE on fees. Only 100 courses for communication, many of them on practice related area. I don't deal with insurance. I state my fees as the office policy. I don't bring it up in the first call. Neurotic therapists who have this big issue with money, will announce the fee, even though the client didn't ask it. The client should know what the fee, before the first session. This is why we have the office policies.

A few words about the office. The office is a reflection of yourself. I won't take a dive into that. What's important about the office, that you know what you chose to disclose. Let's move on, so we have time at the end for questions.

The first call. Sometimes, the first call is a do-or-die. The two do-or-dies right now, for many therapists, is the website and the first call. I will attend to websites a little bit, but I know you have done a tremendous amount of work. I was so impressed when I read your Networker article talking about the importance of Facebook profile and page, and stuff like that. Everybody's so neurotic about, and not understanding the issues of the internet. Stop talking about it inappropriately about internet marketing.

Before we get the first call, be very personal at the first call. Take your time, treat them well, don't rush. Be helpful. Give them advise. Give them some suggestions. Give them food for thought. Suggest some referrals. Follow up with an email. Be helpful in the first phone call. I have people whom I talk for about 17 minutes on the phone on the first call. I didn't speak with them again. Five years later, they'll solicit "You were so helpful on the phone, now I have a bigger issue. I want to come see you in therapy." Or, for a friend. "This guy is really helpful." Don't rush the first call. Sometimes, you do-or-die. You need, in some regard, to show up in the first call.

If they ask me about managed care, I'll say, "Oh, no. Being part of managed care, that means all your information is in a big company computer, and it poses a potential danger to your future jobs, life insurance, health insurance." Nobody likes to hear that. "It can compromise your privacy, because everything in a big company computer can be exposed, easily. Every high school drop out is hacking into company's computer. We don't have control of treatment." I goes on and

on and on about managed care. I found it very easy to explain to people why what they can get for \$20, even though it seems better than \$200. There's a lot of risk and costs with making \$20 co-pay, rather than \$200 out of pocket. You need to be prepared with a good spiel about managed care. I have some articles online, article pages, free articles, on this very issue. You need to know how to deal with managed care and the dangers that come with it.

Joe: Ofer, there's a question. "How long do you usually spend on the first call?"

Ofer Zur Ph.D.: It varies. 10 to 20 minutes.

Joe: Someone else asked, "Could you speak at some point, on today's call, about how to transition, if you have an insurance-based practice, and you want to transition to a fee-for-service practice."

Ofer Zur Ph.D.: Excellent question. You start doing what you, Joe, teach people, and what I'm talking about today. When the time comes when you say "I'm going to transition", you write a letter to the insurance companies that you're going to give up the panel. You write letters to clients, or talk to them. You put it in your records that you've decided not to work with insurance companies, or managed care, because you find them immoral and you find them unethical, whatever you want to write in that. To give people a chance to transition, you may want to give a referral. You write this letter as a statement, as part of your marketing, in some regards. I know, when I work with some people, the local paper puts in a notification that this client is not working with this company. Give the reason for that. The media loves to harp on insurance companies and managed care. Some people use this letter when I coach them on private practice. They use the letter as a marketing.

Joe: Ofer, do you have some links on your website, discussing the dangers of managed care?

Ofer Zur Ph.D.: Yes. I have a whole brochure online.

Joe: Okay. Good. One other question. Someone asked, "On your slide about managed care, it says 'low quality'. Was that a typo? Was that supposed to be low quality?"

Ofer Zur Ph.D.: Probably. I don't know what it is, but probably. I probably have a bunch of typos in it.

Joe: It says, "low quality". They wondered if it meant low quality. Okay.

Ofer Zur Ph.D.: Yes. Low quality. Again, the first call, emotionally, morally, I would not be afraid to tell the woman, "What? Did he push you, and you took it just like that? That's not cool. Did he say that?" I said, "No. I don't believe in that." I show up. The way I show up, to your presentation right now, I show up in my first call. I sometimes tell stories about myself, and I give personal examples, so they get a sense of who I am. We need to move along here, a little bit faster. Let's see. What else?

Joe: Okay.

Ofer Zur Ph.D.: Marketing. The efforts of marketing is becoming an expert who can help people live better, happier, healthier, and longer. An expert who can help is the true key issue. Everybody on this call will have a chance to look back at this PowerPoint, so I'm going to move a little bit faster, here. People will pay for what they value. They are paying, already, as I say, for cars, clothes, pornography, hairdressers, cosmetic surgery, acupuncture. We just don't know how to charge. People will pay. If they value what they get from you, if they think you are helpful, and they like what they get, people will perceive you as expert, who can help, and this is when they turn to you. You show up, present yourself well in your marketing, as well in the first call, and you get referrals.

How do you do marketing? You give free lectures, if you are into lectures. Who doesn't need some help about love, about parenting, dealing with teens and drug abuse, dealing with internet use, how to balance life in a harried time? Of course, the internet and cyber bullying is huge right now. If you don't like to speak, you can just, in the privacy of your home, you write articles to local newspapers. They love to get something intelligent about local events. There was a rape one time in the community where I lived. I did a series of articles, and a public forum, actually, about rape prevention, or domestic violence, cyber bullying, different kind of bullying. You involve yourself, whether it's through articles in the paper, interviews in the radio, or through presentations. Whatever makes you comfortable, but you must present yourself to the community as an expert.

Then, another form of targeting is you approach people how you can help them. There's not one school counselor who doesn't need some help from counsel on the outside. You talk to priests. If they have divorces in the congregation, or a rabbi. They break the congregation apart. You help them work with couples on how to do divorce with integrity. Local physicians are sometimes referred to me, because I'm outside of panel.

They don't get penalized by managed care for referrals. It's a complicated idea, but it's working for me, for now, 25 years. Talk to the education director of the rotary club. Give free speeches for the ER people, about schizophrenia, bi-polar, etc.,. Give free speeches to the police about burnout.

Let's not talk. We cannot go through today without what you've been focused on a lot, Joe, is now about a website. This day and age, 21st century, you need to create a helpful, pleasant, and personal website. This reflects your taste, style, and value. Part of your marketing plan must be a website. If you don't know how to do a website, you contact Joe. My daughter is kind of involved in helping therapists, right now. By the way, the online marketing manual will not be available for another two weeks. My daughter and I are just finishing it. What is important about a website is... you cover a lot of these things, Joe, in your work, with all this. Yes?

Joe: Yes.

Ofer Zur Ph.D.: I'll reiterate, Joe. You can interrupt me, or correct me. Business legitimacy is what a website is about. Modern day consumers Google you before they call you. Everybody has a website. Plumbers, physicians, psychic, trainers, gardeners, everybody has a web presence. People get to your website in a variety of ways. They may Google you, or they may find your website after they got referred to you. Even when they get referred to you, or heard about you, before they see you, modern day consumers will go to the website and check you out. Joe, do you agree with me on that?

Joe: Definitely. Yes. We've been hearing ... I've heard more stories lately of for people getting a personal referral from another client. Then they'll say, "Well, let me check your website out, first, anyway." If they don't have one, they won't come.

Ofer Zur Ph.D.: Absolutely. Even when the client referred is a friend, which is the number one source of referral, in general, they'll still check your website first. If you don't have a website, talk to Joe, talk to my daughter, or just hire a high school drop out that can do it for you in half an hour. What's in a website? Home page, contact, about-a personal statement about your treatment... You can go to my website and check my philosophy of treatment and my thoughts about managed care. Introductory audios and videos are very helpful this day and age. Excellent resources pages, and links to Facebook, blogs, Twitter, YouTube, and social networking.

On the home page ... Again, Joe, you do so much good work about it, but I'll give my two cents here on the home page. Photo, degree and license, short statement of who you are so they get a sense of who you are, services you provide, menus to the other parts of the website, and short audio and video. It can be very short, but it's human and it's personal. Avoid on your website, too much flash and innovation, long statement of bragging, testimonial. Testimonial from clients, they are unethical. We're not allowed to solicit them. Don't do that.

Joe: Oops.

Ofer Zur Ph.D.: It shouldn't be too complicated. The code of ethics say we are not supposed to solicit them. Some people argue about whether to post it, or not. I'm on the cautious side. Forget about how to create the website. Joe, will you do more work with them, with them. What's important on a website is transparency. Modern day consumers expect to learn who you are, what are the values, what are your approaches. It's beyond degree, and how much you charge, and where is your office, and your orientation. They want to know much more about you. The fact that I climbed Kilimanjaro means a lot for people, for some reason. You present something personal.

Modern day consumers expect to get information from your website, so be helpful. The resource page should not just be a link to general sites like APA or NASW or CAMFT. It should be much more specific. Article: 10 Ways to Beat the Holiday Blues; 21 Days to Increase Your Quality of Your Relationship; How to Deal With Online Sex and Infidelity; blah, blah, blah. It has to be good, helpful, resources, not just general. Again, it's very, very simple to do. Social networking, just make sure that your website is a social networking campaign, as part of your marketing tool. Talk to Joe. Talk to my daughter about it. So is blogging. Blogging can be a fantastic way to express your ideas, your expertise. It's also a fantastic way to do marketing. Joe, you agree with me?

Joe: Yes. Definitely.

Ofer Zur Ph.D.: Okay. More on web marketing. Learn about SEO. Track your progress. Use Google alert. I don't, but I have people who use it for me. Sign up for Google alert. My claim to fame is on flexibility. It's very important. If you do fee-for-service, as I say, do the home office. Play basketball with clients, if necessary. Go for a walk. Accept gifts. On on the issues of boundaries, I have tons of articles and online courses on boundaries and gifts and home visits and dual relationships. Email reply. Learn how to do

text reply. Sometimes, the only way to reach teenagers is via texting. Don't be rigid about it.

Don't practice risk management. Risk management really puts you in a higher risk, unless you can do ethical risk management. Ethical risk management is doing what's helpful, not acting out of fear. Many of the ethics workshops that you took are just campaigns of fear. So many of them are giving you misinformation. There's a way that dual relationship is unavoidable, in small towns. Email with clients is not unethical. It can be very appropriate. You don't always need a diagnosis for to do treatment. You could do it with a focus of treatment, and committed long-term. Texting with clients can save lives. Phone therapy can be very effective. Be flexible. Use touch appropriately. Many times, much more effective than all the words in the world.

The other thing, besides flexibility, in marketing plan, is really the mentioned earlier, go beyond the DSM. When people come to me with depression, I talk about the existential fun. If you need to know more about it, go to Positive Psychology Existential site. I'm talking about the community as a basis for people's early invasion, rather than internal pathology. I'm talking to people about issues of meaning and loneliness,]and freedom, essential site. They don't come to me because they are broken. They come to me because they want to live with a higher quality of life. I train them. In the beginning, the things they have to be broken to come see me. Later one, it's changing.

Then, there's a whole new field that's relevant that we will not cover today. I just put a slide so you know that digital ethics. I have a bunch of articles about it. I have a taped communication credit course on digital ethics. One of the things that you need to know is how to deal with self-disclosure, even if you don't have a website. Clients are Googling us and finding out a lot of information about us. Is it okay to Google client? Won't have time to go into that, but it's a huge field. Of course, Joe, you deal with some of these issues about Facebook and Facebook friends. We won't have a chance to talk about it. It's a topic for another webinar. Do you feel like we can do digital ethics, Joe? It's a hot issue.

Joe:

Sure.

Ofer Zur Ph.D.:

I guess you hear the links is the last slide to free articles. Tons of them on many of the issues we discussed today. 130 online courses. I have private practice material. I have clinical forms, including office policies, and many other forms in my online catalog. You get a 10% discount code if you put

UCB88. Joe and Mel, fantastic work. In acknowledgement of that, 10% discount. Now, I'm open to questions. What time do we have, Joe?

Joe: We have about ten more minutes. If anyone wants to ask a question on the phone, hit star six, on your phone. Here's a question. "How do you balance commitment to ensuring access to low income individuals, with what you're talking about, by having your full fee?"

Ofer Zur Ph.D.: As I mentioned before, it's, again, I mentioned before, if you have 20 people, if you go back to the slide, there are two people that I see for free. Four people that I see for low fee. I have a commitment, always a commitment to work with people with low fee. I don't do, personally, sliding scale. I find it's very, very, hard. People say they don't have money. What happens is their spouse gets an inheritance, or they sold the house, or some kind of investment matured. I found it very messy to work on a sliding scale. If I end up with people who lost a job, I'll reduce their fee. I always have people that I charge no fee at all. I can have a commitment for no fee, but also have a commitment to average \$160. That balances for 20 hours a week therapy.

Joe: Ofer, how about testimonials? What's your position on testimonials on a website, someone asked.

Ofer Zur Ph.D.: I'm not good at that. I like to show up. I prefer if I have space on a website to put a statement of where I've been living, or to put an audio or a video, rather than testimonial. I, personally, just have an aversion for that. I think it can be very effective for some people. People are using it, it must be working. I'm not good at that.

Joe: Also, do you do follow-up calls with patients, to see how they're doing, in between, when they're not coming to therapy.

Ofer Zur Ph.D.: Like after they're terminated?

Joe: Yes.

Ofer Zur Ph.D.: In between? I don't initiate a call. Absolutely, not. I find it highly intrusive. If clients got in between, or terminated in between sessions of intermittent long-term, I won't call them on my own. They know where to reach me. I won't do that. In between sessions, on-going therapy, oh, yeah. Oh, my goodness, yeah. I'll have follow-up in between. Absolutely. In an on-going therapy, when I'm engaged with my client.

Joe: Okay. Someone has a question, on the phone.

Female: Yes. Could you just state briefly how you use Facebook, as a part of your practice? That's seems so public to me.

Ofer Zur Ph.D.: Facebook. You need to know the difference between Facebook profile, which his personal and private, and between Facebook page, which is a marketing tool. We're going to have an online marketing guideline, as a guide, out probably in a week, or two. Check with our website. Meanwhile, Joe can also talk about this one, at length. He knows tons of stuff about it.

Joe: Yes. Let me just say one quick thing, Ofer. The personal profile, and the business page, are totally independent. If you're not using Facebook for personal reasons, or social reasons, you can even fill out the personal profile with your office address. Then, there's no issue, in terms of privacy. If you are, be sure to check the privacy settings on Facebook, because they change frequently. I don't ever trust what Facebook says about privacy. Assume people will see what's on there.

Ofer Zur Ph.D.: Beautiful. Everything you write on the website, anything you write on the web, just treat it as if it is written on your forehead, or the front page of the New York Times. Joe is absolutely right. The privacy is questionable, nevertheless, you separate your private profile, by working on the privacy, on the settings. If you don't know how to do it, just get a high school drop out, go during school hours on the street, see who's not at school, and they can help you. Get an expert, like Joe, my daughter, and separate the profile from the page, and use a page as part of your marketing tool. Very important to be able to use it. You don't need to know how to do it yourself. I don't do it, myself. My daughter does it for me. More questions, Joe.

Joe: Yes. Here's a question. The MFT organization in California says that you have to disclose your fees, in advance, give notice before the first session. You're saying you tend to not do that.

Ofer Zur Ph.D.: I said it very clearly that my fees are in the informed consent of office policies that everybody gets before the first session. I don't need to announce it in the first call, unless I'm getting asked to bring it up. There's nothing wrong in not saying it in the phone session. Everybody who tells you differently is just a risk management fear campaign. They have to be notified, but it does not need to be through the phone, necessarily. It can be through the office policy informed consent. If you don't have one, get my 61 essential clinical forms right after this call. You need to have an informed consent the client's signing, at the beginning, in my case, most of the time, before the first session. Yes, CAMFT is right, but it does not

mean that you need do discuss it on the phone. Some people get insulted. I sometimes talk to somebody, "... and, my fee is ...". He snapped back at me, "I didn't ask you for my fee. I can afford you." He got insulted. Rich people are insulted, sometimes, when you bring it up.

One more comment about private practice. Unless you work in special setting, you don't need to have the 911 in the outgoing message. Thousands of people, over the years, I call them back and it says, "You have reached the office of Joe Schmo. Please leave your name and number, after the sound of the beep. If it's an emergency, call 911." You don't need to have it, unless you work with suicidal people, you work with the general population, or it's mandated by your organization. That gives people the sense that you work with people who are on their way to the bridge. That's not what lucrative, private practice is usually about. If I want to talk to people on the meaning of life, or love and relationship and parenting, they don't need to hear this 'on the way to the bridge suicidality 911 business'. Leave it out. It belongs in the signature in the email, it belongs perhaps in the office policies. It does not need to be in the outgoing message. It's another legacy of the fear campaign by attorneys and ethicists, who just run on fear, rather than on care.

Joe: Right. Okay. One last question. Are you saying not to put your fees on your website?

Ofer Zur Ph.D.: I say put it, or not put it. It doesn't need to be upfront. Show up first. It's okay to have it there, if you choose to. I don't. Okay. It has to be in the office policies. This is your comfort zone. It shouldn't be upfront. They should like you first, appreciate you first, get to know you first, before they get to the fee. It's personal. Wow. We covered a lot, Joe.

Joe: We covered a lot. For everyone who's listening, I'll be sending out a link, on Monday, which will be a PDF of the entire PowerPoint, and a recording of the whole audio. If you had trouble hearing, and you want to clarify some of the information, you'll have every word that was on the slide, then every word that was said on this last 60 minutes. I want to thank Dr. Zur for his time and expertise. He's been a real pioneer in the field, one of the most prolific writers in the field of private practice and psychology. Please go to zurinstitute.com. It's a wealth of great information. I would also recommend you also subscribe to his clinical update, which is a free newsletter. How often does that come out, Ofer?

Ofer Zur Ph.D.: Every couple of weeks.

Joe: Yes. It's a fantastic newsletter, with his views of all the changing fields of digital ethics, clinical issues, technology. I think it's one of the most valuable newsletters that I've ever read in our field. Thank you, again. Thank you all for joining, and your great questions. As I said, look for the link, on Monday. We wish you all the best of success in creating your fee-for-service practice.

Ofer Zur Ph.D.: Joe, you have been fantastic. You took the torch, and ran with that, in such a wonderful way, Joe.

Joe: Good.

Ofer Zur Ph.D.: You're really ushering us into the 21st century, in a most wonderful, wonderful, way. Thank you, and Mel, on it.

Mel: Yes. Thank you. Thank you, Ofer. You did a great job, by the way.