

PROFESSIONAL DISCLOSURE STATEMENT FOR BEHAVIORAL HEALTH PATHWAYS

In accordance with the Annotated Code of Maryland, Health Occupations, Health-General Article, Title 4, Annotated Code of Maryland, and in accordance with COMAR 10.42.03.

Professional Disclosure Statement

**All provisionally licensed and graduate trainee clinicians
practice under the clinical supervision of**

**Ramona Harrison
MD Approved Clinical Supervisor
Licensed Certified Social Worker- Clinical #14449**

**Rose Velez- Miggins, BS
Marriage and Family Therapy Trainee
(MFT- Northcentral University; expected 2024)**

All clinicians listed are authorized to provide services involving the application of counseling principles and methods in the diagnosis, prevention, treatment, and amelioration of psychological problems, emotional conditions, or mental conditions of individuals or groups.

Fee Schedule:

*Individual Therapy: \$85-175
Couples/Family Therapy: \$200- \$250*

This information is required by the Board of Professional Counselors and Therapists, which regulates all licensed and certified counselors.

**Maryland Board of Social Work Examiners
201 W. Preston Street, Baltimore, MD 21201-2399 / (410) 767-6500**

**BY CLICKING ON THE CHECKBOX BELOW I AM AGREEING THAT I HAVE READ,
UNDERSTOOD AND AGREE TO BE SEEN BY ANY OF THE INDIVIDUALS LISTED ABOVE.**