



BEACON OF HOPE PROGRAM – APPLICATION

PURPOSE AND SUMMARY:

The Beacon of Hope (BOH) Program was established in 2017 by Lighthouse Psychiatry Advanced TMS Therapy and Research as a gifting program for those individuals who did not have the means or resources to receive Transcranial Magnetic Stimulation (TMS) Therapy for their management and treatment of depression.

In brief, TMS Therapy is a non-invasive medical procedure which delivers pulsed magnetic fields towards the head to directly induce electrochemical changes in the brain. These magnetic fields are the same type and strength as those used in magnetic resonance imaging (MRI) machines. TMS Therapy is a safe and effective treatment for patients with depression who have not benefitted from antidepressant medications. Specifically, TMS has been shown to relieve depression symptoms in patients who have failed to receive satisfactory improvement from prior antidepressant medication. Unlike other neuromodulation techniques, TMS improved overall brain function through a relatively gentle and gradual process.

Please note TMS is not for everyone. Because TMS using magnetic energy, the following restrictions apply to avoid serious injury or harm to you. These restrictions include but are not limited to: cochlear implants, aneurysm clips or coils, stents, electrodes to monitor your brain activity, ferromagnetic implants in your ears or eyes, bullet fragments, facial tattoos with metal ink, deep brain stimulators, vagus nerve stimulators and other metal devices or objects implanted in the head.

Please note TMS Therapy is a medical procedure. Although we may have a high level of success, remission results are not guaranteed and outcome may vary from national average at completion of treatment program.

Please note applying for the BOH Program is not a guarantee of acceptance and enrollment into the program.

If you are interested in undergoing our TMS treatment program, please complete this BOH Program application to see if you will qualify to receive our TMS treatment as a gift to your healing.

SUBMISSION DATE: _____

GENERAL INFORMATION

NAME: _____

ADDRESS: _____

PHONE: _____

EMAIL: _____

INDIVIDUAL EMPLOYMENT STATUS?

Currently EMPLOYED? YES NO Last date of employment? (MM/DD/YYYY) _____

FAMILY INCOME STATUS?

Currently one or more family member employed? YES NO Total household gross income (before taxes/deductions)? \$ _____

CURRENT DISABILITY STATUS? (Check all that apply)

- Not on disability
- Long-Term Disability
- Temporary Disability
- Social Security
- Military Disability
- Private/Family Support
- No source of income

DO YOU HAVE PRIVATE HEALTH INSURANCE(S)?

- Aetna
- BCBS
- Cigna
- Compsych
- HealthNet/MHN
- Humana
- Magellan
- United/Optum
- UMR
- No private health insurance

BEACON OF HOPE PROGRAM DETAILS, RESTRICTIONS, AND RULES:

1. First and foremost, BOH Program is a “gifting” program offered specifically by Lighthouse Psychiatry for an individual who do not have a qualifying insurance which will cover their TMS treatment or who do not have the financial means or support to cover the full cost of receiving TMS therapy. By definition, “gifting” is a charity offering of a free service. Hence, initial evaluation will be based on financial circumstances, as well as, clinical needs.
2. In addition to this specific application, an additional manufacturer’s NeuroStar application will need to be completed before proceeding further.
3. Individual must sign all Lighthouse Psychiatry clinic consent, privacy forms, clinic policies, and TMS consent.
4. **Individual has choice to sign consent and release of information for marketing and promotional usage of individual’s name.**
5. Complimentary psychiatric evaluation for clinical assessment of indication and eligibility to receive TMS therapy.
6. Individual may need to sign release of medical records from other providers as part of the psychiatric evaluation.
7. **To participate in the BOH Program, the individual must be in stable mental health and not be in crisis. Establishment of such will immediate disqualify individual from participation in the BOH Program.**
8. Individual with a history of the following will be immediate disqualified from BOH Program: aneurysm clips or coils, brain vessel stents, electrodes to monitor your brain activity, ferromagnetic implants in your ears or eyes, bullet fragments, facial tattoos with metal ink, deep brain stimulators, cochlear implants, vagus nerve stimulators, other metal devices or objects implanted in the head, and history of recent seizures.
9. Upon completion of psychiatric evaluation and it is determined the individual qualifies for TMS, then the individual can enroll into Lighthouse Psychiatry’s index course of TMS therapy.
10. Duration of TMS therapy will ranch from 20 to 30 TMS treatments, based on clinical parameters.
11. If accepted into BOH Program, TMS therapy must be delivered at Lighthouse Psychiatry by Lighthouse Psychiatry personnel.
12. Individual will need to follow strict guidelines detailed here, but not limited to here, to stay in the BOH Program for duration of TMS therapy.
13. Under the BOH Program, Lighthouse Psychiatry is only “gifting” one psychiatric evaluation and one index TMS therapy course (20-30 treatments). Any additional services rendered at Lighthouse Psychiatry are billed out to the individual and he/she is financially responsible for accrued cost of service.
14. TMS therapy offered through the BOH Program can be stopped at any time for any reason during the index course by either the individual or Lighthouse Psychiatry.
15. Because this is a BOH Program is a “gifting” program, Lighthouse Psychiatry’s primary role is to purely deliver TMS therapy. Remission from depression and positive outcome are not guaranteed. There is a possibility the individual may not receive any benefit from TMS therapy through the BOH Program.
16. If individual decides to receive TMS therapy at a non-affiliate clinic of Lighthouse Psychiatry during the BOH Program, he/she automatically volunteers to immediately forfeit and quit their participation in the BOH Program. This does not preclude the individual from receiving TMS therapy at Lighthouse Psychiatry at a later date outside of the BOH Program.
17. Once TMS therapy is completed through the BOH Program, the individual can volunteer to transition into Lighthouse Psychiatry’s full clinical service to continue receiving TMS therapy as a taper, maintenance, or repeat index course. Outside of the BOH Program, the individual is solely responsible for all financial obligations accrued from Lighthouse Psychiatry. Payment of services is required prior to beginning any additional TMS treatments beyond those allotted through the BOH Program.
18. Once BOH Program is complete, there is no continuing obligations between the individual and Lighthouse Psychiatry.
19. The details, restrictions, and rules noted above are the basic elements of the BOH Program. Additional restrictions may apply.

By signing and dating this application, I acknowledge and fully understand the BOH Program is a “gifting” charity offering and all the specific details, restrictions, and rules noted in this application. In addition, I acknowledge to being honest and truthful in my completion of this application. I am aware and accept that I may be disqualified from BOH Program if I falsified any information documented in this application and other forms completed for Lighthouse Psychiatry.

Signature

Date

PLEASE FILL OUT AND RETURN TO US VIA FAX, EMAIL, OR DROP IT OFF AT OUR OFFICE.