Barbara Z. Witney M.A., MFT Licensed Marriage, Family Therapist

License Number MFT 9620 15810 Los Gatos Blvd Los Gatos, CA 95032 408-356-0677 831-476-8682

Office Policies

Appointments:

Sessions are 60 minutes long. Longer sessions can be arranged, and our agreed-upon fee will be pro-rated accordingly.

Payment for Services:

Payment must be made at the time of your sessions, unless other prior arrangements have been made. Returned checks will have a \$35.00 service charge. If checks are returned more than one, I will request payment in cash, money order, or credit card. If you are using insurance, you will receive a statement that you can give to your insurance company for reimbursement. I am not a provider for any insurance company. My hourly fee will be reviewed at the beginning of each calendar year.

Cancellations and Missed Appointments:

Since the scheduling of an appointment involves the reservation of time specifically for you, a minimum of 72 hours (3 days) is required for canceling or rescheduling an appointment, meaning that if you cancel with less than 72 hours notice, the fee remains due (except for canceling due to significant illness, injury, accident, family emergency and the like). A "No Show" is considered a cancellation and will be charged accordingly. Insurance will not cover charges for canceled appointments or "No Shows".

Emergencies/Telephone Contacts:

If you need to contact me you can call me at (831) 476-88682 and leave a message at any time. I will return your call as soon as possible. In an emergency, I will be happy to give you my next available appointment, or arrange for emergency care. If a lengthy phone consultation is necessary, my fee will be pro-rated for that time. You can also reach me by text @ 831-476-8682 or email me @ bjwitney@cruzers.com. I will give you advance notice of my vacations or other planned absences.

Discontinuing Therapy:

Participation in psychotherapy is strictly voluntary and you may terminate at any time. In the best of circumstances, you and I would decide together when to end treatment. In the event that you wish to discontinue before such an agreed-upon time, I would strongly encourage you to talk about these feelings with me first. The uncomfortable feelings that normally arise due the course of therapy can contribute to a desire to stop coming; discussing the feelings often leads to a greater understanding of the problems that brought a patient to therapy.

<u>Litigation Limitations:</u>

Psychotherapy often involves disclosure of very sensitive, confidential information. For this reason, it is my practice to ask you to agree that should there be legal proceedings (such as but not limited to divorce and custody disputes, injuries, lawsuits, etc.), neither you nor your attorney(s) nor anyone else acting on your behalf will call on me to testify in court or any other proceeding, nor will a disclosure of the psychotherapy records be required.

Confidentiality:

As a rule, everything you discuss with me is confidential and I can only release information about our work together with your written consent. There are however, exceptions to confidentiality. Please review the additional form I have provided regarding the limits and exceptions to confidentiality under California law.

By signing this form, "Barbara Z. Witney, M.A. MFT, OfficePolicies", you are acknowledging that you understand and consent to what you have read above.

Name of Patient:	 	
Address:	 	
Phone number:	 	
Signature:		
Date:	 	