Welcome to the forms and other information section of this website. Below you will find and explanation of each form, my cancellation policy, confidentiality, payment and information about sole proprietorship. If you do not see the information you need, please feel free to contact the office directly.

Forms and Information about Each Form

If you have scheduled an appointment, you will be receiving an intake, patient portal link from the health information management software, Simple Practice. The client portal link should also include a personal message and appointment confirmation from the office. Please create a permanent password so you can access the client portal. It not only has your intake information forms waiting for you but can provide access to statements and a secure messaging platform to communicate if you prefer not to use email. Please access and complete initial client information at least 24 hours prior to your appointment.
The forms needed will be listed in the initial link. If you have no email access or do not feel comfortable with this process, speak with the office and we can arrange for you to come in 30 minutes early and do the intake paperwork on paper prior to your appointment.

Forms you will receive in your intake packet via email or in the office:
Intake Form- This section is about your personal history. Please complete as thoroughly as possible. However, if details are difficult to put down or hard to talk about know we can discuss them in sessions instead. Please complete form and sign and date the bottom. Bring this with you to your first appointment completed.

Informed Consent- This is the form which lets you know about office policy and confidentiality. Please read, sign and date this form. Bring this with you to your first appointment. You can print a copy out for your own records as well if desired.

HIPAA Privacy Practices- please read and sign. Let us know if you have any questions or would like a copy of this policy paperwork.

Demographics Information- This section is essential even though some it may seem to copy the intake form information. Please fill out everything that applies to you on it including emergency contact, insurance information, etc. Also bring a copy of your insurance card to your first appointment.

Optional Forms:

Release of Authorization- fill out this form if you will be needing me to release confidential information to anyone (i.e. social worker, insurance company, doctor, family member, etc.). Because your therapy information is confidential health information, a release must be completed if you need me to release information to anyone else. Read more about confidentiality by clicking here.

Debit/Credit Card Preauthorization Form- Complete this form if you would need to set up credit/debit card payment by a third party or want to take care of payment by credit card without using your session time to process the payment. Please make sure the person who will be using their credit card to pay for sessions (cardholder) signs this form as well as the person receiving therapy (client). Please talk with me in session if you are not sure if this form is necessary (i.e. you wish to pay at the time of service by credit card or any other situation).

Other Important Information

Fees and Payment Information:
My standard session fee is $140 for a 55 to 60 minute session. Additional length sessions are prorated based upon $140 per hour. I accept checks, cash and credit cards for payment. Please be prepared to pay for sessions at the time of service unless you have made other arrangements in advance. If you choose not to leave a credit card on file, it is often easiest to process payment at the beginning of session so we can focus on your session fully for the remainder of the appointment time.

Cancellation Policy:
It is my policy to charge for appointments booked unless they are cancelled at least 48 hours or 2 business days in advance. (i.e. an appointment at 2:30 pm on Wednesday must be cancelled at or before 2:30 pm on Monday to avoid being billed, an appointment at 10 am on Monday must be cancelled by 10 am on Thursday, etc.) When an appointment is booked that time is not available to other clients, for meetings or any other activities. Please let me know in advance if you cannot keep your appointment.

Confidentiality:
By law and professional ethics, your sessions are strictly confidential. Generally, no information will be shared with anyone without your written permission. There are, however, a number of exceptions to this confidentiality policy.

If you report that you or another person has been the victim of child abuse, I am required by law to report this to the authorities investigating child abuse.
If you report that you or another person has been the victim of elder or dependent adult abuse, I am required by law to report this to Adult Protective Services or other appropriate authorities.
If you threaten to seriously harm yourself or someone else, I may be required to take one or more or the following steps: contact police, warn the potential victim, or take other reasonable steps to prevent the threatened harm.
If you sign a release of information requesting and authorizing me to discuss or verify your participation or other treatment information.

If I am ordered by the court to testify or release records. In this situation, I may be required to give a summary of the case records whether or not a release of confidentiality was signed.
The other possible exception to complete confidentiality would become relevant if I should need to seek consultation from colleagues regarding your case. If this should be necessary, I will not use your name or any combination of identifying data that would make it likely that your identity would be ascertained by others.

Notice of IRC Subchapter S Corporate Ownership:
Please be aware that Alice Petty-Hannum, MFT is a business held and owned by an IRC Subchapter S Corporation; Bridges to Self-Empowerment, A Marriage and Family Therapy Corporation. Alice Petty-Hannum, MFT is managed solely by Alice Petty-Hannum. This IRC Subchapter S Corporation is family owned and there are no other partnerships or affiliations with others who occupy office suites at 406 Chinn Street, Santa Rosa or any other location.