

GENERAL INFORMATION AND PRACTICE POLICIES

Office Location:

My office is at 1260 N Dutton Avenue, on the block between College Avenue and Guerneville Road, on the east side of the road a quarter mile from College Avenue. From 101, take the College Avenue exit (turn right if coming from the north; turn left if coming from the south). The second traffic light is North Dutton; turn right and my office is a quarter mile down on the right hand side. It's a two story brick building named the "Atrium Court". My office is in suite 175, which is in the southwest corner of the building just inside the South lobby entrance. There is a small waiting area inside the suite. There is no need to knock on my office door. I will be out at the appointment time.

Professional Fees:

Initial Consultation/Assessment -----	\$400
Psychotherapy (45 minutes) -----	\$300
Brief psychotherapy/medication followup (about 20–25 minutes) -----	\$150

Payments and Billing:

You are responsible for payments for all professional services. They are due at the time of the service. You may pay the fee at the time of your session in cash, by check, or with MasterCard or Visa. If you require billing statements for corporate 'cafeteria' plans, tax purposes or insurance reimbursements, statements will be sent to you at the end of each month. These statements will include all necessary information.

Medical Insurance:

I am not a contracted provider for any health insurance carrier. I am not a participating provider for Medicare or Medi-Cal. If you are a member of an HMO insurance plan, your insurance company will not reimburse you for any services I provide. If you are a member of a PPO insurance plan, your insurance company will reimburse you for a portion of my fees. The amount of reimbursement varies from plan to plan. I will provide you with the necessary information to obtain reimbursement, but any reimbursement to which you are entitled is a business matter between you and your insurance company.

Missed Appointments and Late Cancellations:

You will be charged the full fee for any appointments you schedule and do not complete, unless you give me 48 hours notice that you are canceling the appointment. The 48 hour period does not include weekends or holidays. If you provide me with less than 48 hours notice and I am able to fill your appointment time with another patient, you will not be charged. There are several reasons for this policy, which I will be glad to discuss with you at our first appointment. Unfortunately, there may be circumstances beyond your control that force you to miss an appointment; however I am unwilling to pass judgment on what is a 'good' or 'bad' reason, and therefore I will follow the policy in all cases.

Availability Between Sessions:

I am generally available for routine or urgent phone calls between sessions, and can return messages left on my voice mail within a few hours. True emergencies are best managed at an emergency room. Most weekends and holidays I will not be available and my voice mail will instruct you whom to call if you can't wait until I am again available.

Legal Matters:

Confidentiality:

You will have complete confidentiality for all elements of treatment with me. I will not even acknowledge that I know you or that you have been to my office unless you specifically authorize me to do so. There are a few legal exceptions to this confidentiality, which I will discuss with you if you are interested.

Law Suits:

I do not carry professional liability (malpractice) insurance. By becoming my patient, you agree that if you wish to sue me for any aspect of malpractice, your complaint will be adjudicated by an arbitrator of our mutual choice, instead of by a jury trial. At this binding arbitration you may be represented by an attorney. You further agree that if the arbitration finds that your charges are unfounded, you will pay all attorney fees of both parties as well as any other costs of arbitration. This type of agreement is widely used in medical practices and has been shown to reduce frivolous lawsuits and to result in the satisfaction of patients with legitimate complaints, since more money is available for the patient who prevails rather than being spent on expensive legal fees and court costs.

I have read and I understand and agree to all aspects of Dr. Pierce's office policies and procedures, including my responsibility to pay fees for services, missed appointments and late cancellations, and the binding arbitration agreement.

print name

signature

date