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Office Policy and Procedures

- **Cancellations- Must be made 24 hours prior to our scheduled time or you will be charged for your full appointment.** If you do know in advance that you cannot make a scheduled appointment I would appreciate as much time as possible.
- **Late Arrival-** I will try to accommodate you, however, if I have a client following you your session may need to be shortened.
- **Mandated Reporting-** I am mandated by state law to report any physical abuse towards a child or dependent elder to State Protective Services that is disclosed during our sessions.
- **Insurance-** I do not bill insurance directly. I will be happy to provide you with a billing statement for you to submit to your insurance company. Please note that for any insurance reimbursement you will need a diagnosis. We will discuss this together to ensure that I generate an appropriate statement.
- **Payment-** for services is due at the time of your session. Many clients choose to keep a credit card on file for this purpose. I accept checks, Mastercard, Visa and American Express.

I have read, understood, and agree to the above conditions. I have clarified any questions before signing.

(Client or Guardian Signature)

(Print Name)

Date _____