



Professional Disclosure Statement

Sandra Ann Kahn
Office: 980-285-3373
LCPC # 180008622, LCMHC # 15669
Skahn@scgnc.org

Qualifications

I earned an MA in Clinical Psychology (2009) from Wheaton College. I am a Licensed Clinical Mental Health Counselor LCMHC # 15669 approved by the Board of North Carolina Professional Counselors. I am a Licensed Clinical Professional Counselor LCPC # 180008622 approved by the Illinois Department of Financial and Professional Regulation. I have over fourteen years of counseling experience.

Counseling Background

My experience is in out-patient clinical professional counseling services, as well as residential and partial hospitalization.

I offer counseling services to adult and adolescent individuals, as well as couples. My counseling services address concerns including, but not limited to:

- Depression and anxiety
- Shame, self-esteem
- Spirituality and Existential concerns
- Grief, loss, trauma
- Developmental and Life Transitions
- Gender and Sexuality
- Couples concerns such as: conflict resolution, boundaries, intimacy, infidelity and media impacts on the marriage

My therapeutic approach has a holistic framework, integrating biological, psychological, social, and spiritual dimensions of well-being. I seek to integrate techniques to promote greater wellness for individuals who seek support for their goals. While my work seeks to care for a client's experience of present circumstances, I view these experiences with a holistic curiosity about the impact of the past (known as a psychodynamic orientation). Existential concern resources are also used to help in the pursuit of meaning and understanding.

I integrate a variety of therapeutic techniques which employ problem-solving, skill-building, exploration of thoughts and emotions, mindfulness, parts-work, trauma treatment exercises and resource building. Treatment techniques may be drawn from Cognitive Behavioral Therapy, Internal Family Systems, Acceptance and Commitment Therapy, as well as EMDR and Emotion Focused Therapy.



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Session Fees and Length of Service

I will discuss goals, objectives, methods and time frame of your treatment, understanding that these may be modified as therapy progresses. Session frequency and duration may vary. Generally, sessions for individuals are provided weekly and are 38-60 minutes long within the scheduled appointment hour. The length of treatment varies depending on the client (s) and the nature of the problems.

My fee is \$150.00 per session for individuals, couples and family therapy with \$175.00 for the initial intake. We accept cash, checks, and credit cards (Mastercard and VISA only) for session payments and all fees are due at the time services are rendered. We also accept several insurance plans. If you wish to have us pre-authorize services with your insurance company, please let us know. Note that it is our mission to provide services at an affordable rate and therefore we also offer a sliding scale fee which ranges from \$90 to \$150 per session and is based on your income. Here is the sliding scale based on earned income:

Annual Household Income	Fee Per Session
<\$20,000	\$30
\$20,001 - \$30,000	\$50
\$30,001 - \$40,000	\$75
\$40,001 - \$50,000	\$90
\$50,001 - \$60,000	\$100
\$60,001 - \$70,000	\$115
\$70,001 - \$80,000	\$125
\$80,001 - \$90,000	\$140
>\$90,001	\$150

If you are unable to attend a scheduled session, please call to cancel (980-285-3373) or reschedule at least 24 hours in advance of your appointment to avoid being charged full fee for the visit (full fee is \$150, even if insurance or sliding scale is normally used for a client).

The fee agreed upon for our sessions is _____.



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Use of Diagnosis

Some health insurance companies will reimburse for counseling services and some will not. In addition, most will require that a diagnosis of a mental-health condition which meets their requirements for reimbursement. If a qualifying diagnosis is appropriate in your case, I will inform you of the diagnosis before we submit the diagnosis to the health insurance company. Any diagnosis made will become part of your permanent insurance records.

Confidentiality

All of our communication becomes part of the clinical record, which is accessible to you upon request. I will keep confidential anything you say as part of our counseling relationship, with the following exceptions: (a) you direct me in writing to disclose information to someone else, (b) it is determined you are a danger to yourself or others (including child or elder abuse), or (c) I am ordered by a court to disclose information (a subpoena is not a court order).

Complaints

Although you are encouraged to discuss any concerns with me, you may file a complaint against me with the organization below should you feel I am in violation of any of these codes of ethics. I abide by the ACA Code of Ethics (<http://www.counseling.org/Resources/aca-code-of-ethics.pdf>).

North Carolina Board of Licensed Clinical Mental Health Counselors
P.O. Box 77819
Greensboro, NC 27417
Phone: 844-622-3572 or 336-217-6007
Fax: 336-217-9450
E-mail: Complaints@ncblcmhc.org

Illinois Department of Financial and Professional Regulation
James R. Thompson Center
100 West Randolph Street, Suite 9-300
Chicago, Illinois 60601
Complaint Intake Unit - 312-814-6910
File Online: <https://www.idfpr.com/Admin/Complaints.asp>



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Acceptance of Terms

We agree to these terms and will abide by these guidelines.

Client: _____ Date: _____

Counselor: DocuSigned by:
Sandra Kahn
BBB7FDB7F87A47D... _____ Date: 3/15/2024

***The HIPAA Psychotherapist/Client services agreement was made available to me.**