



WELCOME – Policies and Procedures

PLEASE INITIAL NEXT TO EACH ITEM AND SIGN AT THE BOTTOM

THERAPY SESSIONS

- **Direct therapy sessions are 25 to 27 minutes.** The last 3 to 5 minutes may be used for consultative services, parent discussions and/or documentation purposes.
- **If you choose to leave the therapy session, please be prompt in picking up your child.** When his/her session is over we do not have a means for childcare. Please be available for your consultative time to discuss your child's progress (i.e., 8:25, 8:55, etc.).

PAYMENTS / INSURANCE

- **INSURANCE.** Clients are responsible for determining their insurance benefits. As a courtesy, we will provide a superbill for you to submit to your insurance company for reimbursement. This will include the necessary codes. However, Speech Solutions does not communicate or coordinate with insurance companies. I am a private pay provider. All services are paid in full at time of therapy.
- **PAYMENTS – Payments will be collected at each appointment.**
- We accept cash, check, Venmo, Zelle, Pay Pal only, no credit card transactions at this time.
- ***You are ultimately responsible for all payment obligations arising out of your treatment or care and guarantee payment for these services. You are responsible for deductibles, co-payments, co- insurance amounts or any other patient responsibility indicated by your insurance carrier. The superbill will note "paid in full" so reimbursement goes directly to you.***

ATTENDANCE / FEES APPLIED to NO-SHOWS and less than 24 HOUR cancellations

- **CANCELLATIONS –** We understand everyone has very busy schedules. However, please give us a minimum of a 24-hour cancellation notice. Please refer to our Cancellation Policy for details.
- A **"no-show"** fee of \$40.00 will be applied to your invoice when a "no-show" occurs.
- You will be notified as far in advance as possible when your clinician is ill, on vacation or attending a continuing education conference.
- If you need to make changes to your child's therapy schedule, please e-mail Stacy at brand4speech@gmail.com

HEALTH & WELL BEING

- **Please do not bring your child if he/she has a fever or has vomited within the last 24 hours.** Children do not perform well under these conditions and expose other children to illness. If your child becomes ill, please email or text as soon as possible to reschedule.

REPORTS

- A review of your child's progress will be conducted approximately every six months or yearly depending on your child's age and needs. At that time, we will provide you with a written report.

Signature Parent/Guardian _____