the Gift of Speech	
Payment for service	
Payment for services will be due and payable on the day of service.	Initials
<u>Insurance Payments</u>	
All effort will be made to verify insurance coverages, service limits, an is verified at time of evaluation and initial treatment session. It is patient response-co-insurance, and co-pay information as well as to inform this clinic of insurance maximum be reached, payment for services falls on the patient responsibility. Cof service.	sibility to verify coverage, ce changes. Should a
Recommendations	T
Recommendations made by The Gift of Speech therapists are made for ONLY and do not correspond to any other treatment setting. Patients who are shospital settings will receive recommendations specific to those settings. The Crecommendations should not be used in any other setting.	seen in educational or
Therapy Service	
We thank you for entrusting The Gift of Speech with your therapy need with scheduling and will do our best to work with your family's needs as it pert sessions. We CAN NOT guarantee a therapist, day, or time; however, we do eve to maintain consistency. There are times when situations arise beyond our contyour understanding and flexibility.	ains to scheduling therapy verything within our power
Cancellation Policy	
Cancellations must be made 24 hours in advance. You will be charged missed session fee; it is payable prior to the next treatment session. The therapi understand that circumstances may arise that are beyond our control; we reserve policy for any reason. The Gift of Speech reserves the right to release patients to sessions over a four-week period without 24-hour advance notice.	st at The Gift of Speech e the right to modify this
Dismissal Criteria	
The Gift of Speech is held by ethical and insurance criteria for dismissal services. The rationale for dismissal will be explained by your therapist. You have with the recommendations and seek a second opinion from another agency or the second opinion from another agency of the second opinion from another agency of the second opinion from another agency of the second opinion from a second opinio	ave the right to disagree
Minor Child Woit Policy	
Minor Child Wait Policy	Initials

Children under the age of 13 must be accompanied to their sessions by an adult who will wait for them in our waiting room. PLEASE DO NOT LEAVE OUR WAITING ROOM.

	Initials
Personal checks will be accepted. There is a \$25.00 fee for a re-	eturned insufficient funds check.
If your check is refused by the bank, services will be withheld until you has been denied, you will need to provide cash/card for all further servi	· · · · · · · · · · · · · · · · · · ·
Patient refusal	
	Initials
The Gift of Speech reserves the right to refuse evaluation and time, for any legitimate reason.	or treatment of any patient, at any
Premium Therany Times:	

The Gift of Speech has high demand session times of 8:00 a.m., 3:00 p.m., and 4:00 p.m. Especially for these session times the cancelation policy of: ... release patients that have missed two sessions within 30 consecutive business days. Please be advised that advance notice of planned, consecutive absences need pre-approval from management.

Initials

Check Policy