



## **Speech Therapy Disclosure Statement**

### **Insurance Billing and Patient Responsibility**

Discovering Expression Speech and Language will bill your primary insurance for services rendered. As a courtesy we will bill Secondary insurance, however, we reserve the right to have the patient bill secondary insurance in certain situations. We will assist in providing appropriate and necessary documentation to your insurance company.

Please realize that the insurance agreement is between you and your insurance company.

\* It is your responsibility to know any limitations of your insurance coverage. Payment for all services is ultimately the responsibility of the patient.

\* It is your responsibility to notify Discovering Expression Speech and Language of any insurance changes. A change in insurance may mean a change of coverage, some plans do not cover speech therapy services. You will be responsible for any charges which are not covered by the new plan.

### **Payment**

\* An invoice statement is sent monthly to the responsible party on file. The invoice includes copays/co-insurances due from the previous 4-8 weeks to allow for insurance to process the service dates.

\* Payment for services can be completed through our patient portal. The responsible party can contact the front desk to establish their patient portal for payment.

\* HSA, debit or credit card is required to be kept on file to bill co-pays, co-insurances and no show fees.

\* In the event of default of any amount due, the patient is responsible for payment of all collection costs.

### **Attendance Policy**

**Therapy Time-** Speech therapy sessions are scheduled for 30 minutes and initial evaluations for 60 minutes. Sessions are weekly, with a pre-scheduled time slot. The frequency of visits is determined by the evaluating and/or treating therapist's recommendations noted on the initial evaluation, re-evaluations and/or progress reports.

**Consistent Attendance/Cancellation:** Consistent attendance not only ensures steady progress in speech-language therapy, but also makes efficient use of the therapist's time and efforts. Patients are to uphold 75% attendance per month for their scheduled appointments. In the event that a regularly scheduled appointment is canceled, a reschedule or filler appointment can be made to uphold 75% attendance. If a patient

repeatedly misses their appointment time and/or falls below 75% attendance their scheduled appointment time can no longer be held. Patients are then eligible for options such as filler sessions, flex schedule or placed on the waitlist. It is to be noted that extenuating circumstances are considered and these situations should be discussed with the staff.

At times, families may have obligations that cause for a temporary pause in services. Discovering Expression Speech and Language will temporarily hold a child's therapy time for 4 consecutive weeks and/or 8 consecutive sessions for circumstances if it has been previously discussed with our patient care coordinators and/or therapists. Temporarily holding a therapy time must be discussed with our front desk at least 2 weeks in advance to allow our staff time to make proper accommodations.

### **Insufficient Cancellation Notice/"No-Shows"**

\* Should patients need to cancel or reschedule their therapy appointment, we ask that you call our clinic at least 5 business hours prior to the appointment.

\* **Failure to provide adequate notice will result in a 'no-call-no-show' charge of \$25, which will be charged to the credit card or debit card on file.**

\* Should the patient no-shows or cancellations exceed 25% of appointments missed the clinic will discuss next step actions with the family. This can include but not limited to a warning letter, reducing the frequency of visits, removal of regular appointment time, and beginning flex schedule appointments.

\*Please refer to the 'illness and 'weather' policy for exceptions to the policy.

### **Late Arrivals**

Please arrive at least 5 minutes prior to your therapy appointment. If you are going to be late for an appointment, please call our clinic. Your therapy session may need to be rescheduled or canceled due to time constraints. Patients who arrive 15 minutes late cannot be seen for therapy. Continuous late arrivals will be considered for altering the patient's regular appointment time in order to provide sufficient time and instruction for therapy. Please note that if you are late, our therapists **will not** extend the length of your appointment to make up for the time missed.

### **Requesting of Authorization**

In order to continue speech services, your child will need to maintain a current authorization on file. When authorizations expire your child's speech services will be temporarily discontinued until a new authorization is received. Our front desk will notify family members 4 weeks prior to authorizations expiring. It is the role of the caregiver to contact the physician and/or insurance to obtain a new and active authorization.

Discovering Expression will hold your child's therapy slot for 2 weeks from the time of expiration. If authorization cannot be received in 2 weeks time your child's therapy time slot will no longer be held.

### **Illness**

Although Discovering Expression Speech and Language encourages consistent attendance, patients and their families should not come to the clinic when they are sick.

As a general guideline, if children are too sick to attend school, speech therapy should be rescheduled.. Please cancel therapy when any of the following occur:

- \*Vomiting more than twice in the past 24 hours
- \*Rash, lice or nits
- \*Diarrhea
- \*Skin infection
- \*Fever of 100 or more in the past 24 hours
- \*Sore throat with fever or swollen gland
- \*Eye infection
- \*Other signs of illness: tired, pale, lack of appetite, confused or cranky, runny nose

### **Telehealth**

We offer online live web sessions as an alternative way to attend your speech therapy appointment. This is a great way not to miss your appointment due to poor weather, illness, ect. Arrangements need to be made with your therapist prior to appointment.

### **Civility**

DESL is committed to an environment where all our patients, caregivers and staff feel safe and are free from any form of bullying/harassment. Caregivers, patients and employees will not engage in speech and or behavior that would be interpreted as abusive, profane, intolerant, intimidating or considered harassment while on the clinic's premises. Actions, behavior, or language from patients, caregivers and employees that does not align with the Discovering Expressions mission and values may result in the termination of services or employment.

### **Severe Weather**

\* Discovering Expression Speech and Language follows the decision of the business administration when deciding clinic closures or delays that relate to inclement weather. The business does consider the weather decisions and advisements within the community.

\*If delays or closures are announced, Discovering Speech and Language will contact you to transition your appointment to tele-health. You will receive a phone call to confirm this change or an option to reschedule.

\* Although the physical clinic may be closed for weather conditions, telehealth services will continue during regularly occurring business hours.

### **Voluntary Suspension of Therapy**

At times, families may elect to discontinue therapy services prior to all goals being met with their therapist. Some families may elect to discontinue due to a move, scheduling changes, taking a break from services, etc. The legal guardian of the child can elect for a temporary pause of services and/or discharge from services at any time. If a guardian wishes to discontinue services, it is the guardian's responsibility to contact the administration staff at least two weeks in advance. The guardian will be asked to pay outstanding balances prior to the date of discharge. On the date of discharge, your regularly occurring speech language pathologist will complete a discharge summary for your records and well as for your primary care provider.

### **Cancellation of Therapy by Therapist**

Patients will be notified as soon as possible if the therapist cannot come in or will be taking time off. In some instances, Discovering Expression speech and Language staff members are not able to contact patients about canceled therapy until they arrive at the clinic first thing in the morning. To avoid inconvenience, patients requesting early morning appointments should keep this in mind. If your therapist cannot come in, every effort will be made to pair you with another therapist for your scheduled appointment. However, we cannot guarantee another therapist will be available. It is to be noted that clinic/therapist cancellations **do not** affect the patient's 75% attendance rate.

### **Holidays**

Discovering Expression Speech and Language will be closed on the following holidays:

- \* New Year's Day
- \* Memorial Day
- \* Independence Day
- \* Labor Day
- \* Thanksgiving Day
- \* Christmas Day
- \* To provide our staff with a break our clinic is closed the last week of the year for in person and telehealth appointments.

### **Agreement**

I have read and agree to the above billing and office policies. I have had the opportunity to discuss any concerns or questions that I might have about these policies and procedures. I understand my rights/responsibilities as outlined above

Parent Signature: \_\_\_\_\_ Date:

\_\_\_\_\_

Parent Printed Name:

\_\_\_\_\_

Patient's Name: \_\_\_\_\_

DOB: \_\_\_\_\_



### **Insurance Coverage for Speech Services**

*At Discovering Expression Speech and Language we understand that working with insurance can be difficult. We put together a list of common terms that caregivers often have questions about. Please know this is not an exhaustive list and your insurance agreement is ultimately between you and your insurance provider. Our referral coordinator will complete a complimentary insurance check prior to beginning services with our team, however, it is ultimately your responsibility to confirm your insurance agreements with your provider. If you have questions about any of these terms, please contact our referral coordinator, billing coordinator or directly call your insurance provider. We hope you find this helpful prior to beginning speech services with us.*

**Billing Statement:** At Discovering Expression, the billing coordinator charges a family's co-pay/co-insurance to the child's billing account after the insurance claim has been processed. This typically occurs 2-8 weeks after the visit, rather than the time/date of service. A monthly statement will be given to the guardian via an email from Fusion Web Clinic.

*If you prefer to pay at the time of visit, please notify our Patient Care Coordinators so they can complete a credit card transaction at the time of service.*

**Deductibles:** This is the amount your insurance requires you to pay for healthcare expenses before your insurance company will pay a claim.

**Co-Pay/Co-insurances:** This is the cost per visit that is the responsibility of the guardian/insurance holder. A **co-pay** is a set cost associated per visit that your health insurance provider has set forth. A **co-insurance** is a set percentage per visit that your insurance provider has set forth. Your co-pay or co-insurance does not help reduce the amount owed to your deductible per your health insurance plan year.

**Total Out of Pocket:** This is the maximum you will pay for insurance coverage within one health insurance plan year.

**Primary Insurance:** This is your health care insurance provider that receives billing and claims first.

**Secondary Insurance** This is your health care insurance provider that receives billing and claims secondary. This helps cover exceeding balances from a claim that the primary insurance did not cover.

*Tricare plans and Apple Health plans are secondary health insurances if there is another health insurance policy in place. Tricare plans and Apple Health plans are billed secondary to the other insurance on file.*

**Out-of-Network:** Each health insurance company elects for and agrees upon a partnership within specialties, clinics, and healthcare providers. If Discovering Expression Speech and Language is considered an out of network provider, this means that your insurance has not contracted with our company for services. You may have limited or no coverage for speech services with Discovering Expression.

**In-Network:** Your health insurance provider has contracted with Discovering Expression and its providers. Speech services will be covered at Discovering Expression at the in-network rate for deductibles, co-pays, and co-insurances.

**Calendar Year:** Your insurance coverage will be 1/1/202X to 12/31/202X. At the beginning of each calendar year, your coverage and benefits reset. Benefits can change from year to year. Please check with your health insurance provider to determine if benefit changes were made for the upcoming year.

**Plan Year:** Your insurance coverage will be a specific date that coverage begins and it will continue for one year time. At the beginning of each **plan year**, your coverage and benefits reset. Benefits can change from year to year. Please check with your health insurance provider to determine if benefit changes were made for the upcoming year.

**Authorization:** Some insurances require a pre-authorization prior to beginning services. Due to the insurance agreement being between you and your health insurance provider, you may be required to contact your insurance and/or your child's primary care physician to obtain a new and active authorization. If an authorization is not active, services will be discontinued until a new authorization is on file.

**Referral Coordinator**

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