# Policies and Fees

Thank you for your interest in our services. As a private Physical therapy clinic, our goal is to provide high quality services that are helpful to the child/client and their family and collaborate with other professionals. Payments must be made with cash, check, or credit card at the time of service.

## Infant Screening – $25 for infants up to 12 months of age.

This 30-minute developmental screening includes a checklist of findings and recommendations.

## Consultation without Report – $100 for up to 1 hours

Additional time or follow-up session(s) at $50 minutes (prorated)

This is a very specific, limited consultation, without report (not appropriate for obtaining insurance coverage for ongoing treatment). Findings and recommendations will be given verbally. Additional visits are available at the rate of $50 minutes.

## Evaluations with Report – Minimum $200

$100 per hour for time spent, including the following services:

* Direct assessment
* Records review, and
* Telephone consultation with other team members to gain information about the child (as requested).

This cost includes a written report and one-hour parent/team conference. If additional services or consultation are requested (e.g., lengthy team meeting), the charge may be higher.

## Individual Therapy – $125 per session

Individual means up to 50 minutes of direct contact with you and/or your child per treatment session. At times, there may be information that you or the therapist needs to share. As your child’s therapy is scheduled for 30 or 60 minutes, you can request that your therapist set aside time during the treatment to discuss any concerns or questions you may have. Some children require additional time for transitioning to leave after the session and some sessions require additional clean-up time following the session. Time will also be used for the therapist to document what was done during the treatment session. The insurance receipt for each full session will therefore be for 30 or 60 minutes total time. If you arrive late, your receipt will reflect the reduced time that services were provided. Sessions may be 30 minutes per session (25 direct minutes) for a reduced rate of $75.

If written documentation (a report) other than treatment goals is required before 6 months of therapy, there will be an additional charge for the report writing time (see below).

## First Treatment Session Only $175, then $125 a session

When an assessment was done at another facility, a one time, first session charge is at a higher rate to account for the additional time required by the therapist to review records and reports and to plan your child’s therapy. If the assessment was done at this facility, there is no extra charge for the first treatment session. It will be charged at the $125 per session rate.

## First Month Trial Period

The first month of therapy is considered a trial. If we feel the clinician’s skills/personality are not a good match for your child, we will let you know during that time. Likewise, during this time, if you are not satisfied for any reason you may cancel the rest of the sessions without penalty. If there is a change in your child’s therapist, you will be provided another trial period.

## Deposit for Final 2 Treatments – $200

A deposit of $200 is to be paid within one month of beginning therapy. It provides payment for the child’s final two sessions at the time of discharge from therapy assuming that a full two sessions notice has been given before ending treatment.

## Reports – $50/hour

Written documentation requested more often than 6-month intervals will be charged for the report writing time.

## Meetings/Off-site – $150/hour

Rate is for out of the office, local travel (additional charges for more than 15 miles). We want to work in a collaborative manner with parents and members of your intervention team. At times, attendance at meetings (home visit, team meeting, IEP, etc.) may be appropriate. We are happy to try to arrange our schedule (if possible) to participate in such meetings but must charge for the time to attend the meeting.

## Payment Schedules

We are set up to accept cash, check, debit cards, credit cards and some insurance plans. We can issue a Superbill for other insurance plans. Payment is expected at the time of the service.

## Payment Failure

In the event that you make payment with a check which is returned by the bank without payment, you will have 7 days from the time you are notified to make alternate payment arrangements. You will be responsible for any bank fees or charges because of the returned check. In the event that a second check is returned for non-payment, bank fees plus a $25 bookkeeping and processing fee will be charged; and cash will be required from that point forward.

Any balance past due by more than 30 days shall be subject to interest charges of 1.5% per month, plus a $25 bookkeeping and processing fee per month.

## Reimbursement/Funding of Services

Services provided are Physical therapy. For some children, services may or may not be considered “educationally necessary” or “medically necessary.” Our assessment of needs and recommendations will be done in an independent manner and will not attempt to answer funding or reimbursement issues.

## Insurance

Currently, we are able to bill some insurance carriers for you. We will require the co-pay at the time of the session. Any declined services will be payable by the responsible party.

For non-contracted insurance, we are not able to bill insurance for you. We will assist you with the information you need to gain reimbursement (if out of network, outpatient Physical therapy is covered by your plan). Please let us know if your insurance company requests additional information in order to process a claim. While they may send you a letter which states that additional information has been requested, they do not always send us a request for that information.

## School Districts

School Districts typically have their own Physical therapist(s) or an existing contract with a specific agency. Schools only provide Physical therapy as a related service to special education. Therefore, a child generally must first qualify for special education services before individual Physical therapy will be considered. A school district is not required to provide Physical therapy services for a child attending a private school.

Our reports reflect what we have learned about your child from your information and from our work with the child. We cannot write a report telling a school district that they are not providing adequate services. We have not seen their services and have not observed your child in various school environments and programs. We will make recommendations on what would be beneficial for your child’s overall development, not a determination of therapy needs for the child’s educational program.

## No-shows

Appointments are a contract for the exclusive use of the therapist’s time. Parents will be charged the full session rate for no-shows. Please call to cancel if you are unable to make an appointment. Receipts for payments received due to a no-show or failed appointment will reflect no services given and are not eligible for reimbursement by your health insurance.

## Cancellations

A limited number of advanced notice cancellations (more than 24 hours’ notice) for any reason, are provided without incurring a charge. The following are offered each season:

* 2 sessions during the Winter/Spring (beginning of January to mid-June)
* 2 sessions for the Summer schedule (mid-June to mid/late August)
* 2 sessions during Fall (mid/late August to end of the year)

For a child attending therapy twice weekly, 3 cancellations are allowed for each season. Cancellations beyond these numbers (excess cancellations), with more than 24 hours’ notice, will be charged at 1/2 the regular therapy rate.

## Holidays

The following days are considered holidays and are not counted in the allowed missed sessions. If you choose to schedule an appointment on the optional days, our usual cancellation policies apply.

* New Year’s Day (office is closed)
* President’s Day (if the office is open, scheduling an appointment is optional)
* Memorial Day (if the office is open, scheduling an appointment is optional)
* Fourth of July (the office is closed)
* Labor Day (if the office is open, scheduling an appointment is optional)
* Thanksgiving Day (the office is closed)
* Day after Thanksgiving (office is closed)
* Christmas Day and New Year’s Day (the office is closed)

The week between Christmas and New Year’s (if your child’s therapist is available, scheduling an appointment is optional)

\*If your child’s therapist is available on the optional days listed above, you may be offered the opportunity to schedule a session. If you choose to schedule an appointment, our usual cancellation policies apply.

\*If you celebrate a religious holiday, please let us know within 2 weeks of beginning therapy the specific date(s) and that (those) session(s) will not be counted.

\*A cancellation, provided with a minimum of 24 hours’ notice, will not be counted if:

* you are able to schedule and attend a make-up session or;
* the therapist is able to schedule another appointment into your cancelled slot. Therefore, please provide as much advance notice as possible.

We have an answering machine that can take your message 24 hours a day. However:

* For a same-day cancellation, please alert us with a phone call or text.

Cancellations for reasons other than illness with less than 24 hours’ notice or a failed appointment (No Show) will be charged at the full therapy rate.

## Cancellation Due to Illness

Cancelation due to illness with less than 4 hours’ notice, but prior to the scheduled therapy time will be charged at half the therapy rate. *Please cancel if your child has had, within 24 hours of the therapy appointment, a fever, vomiting, diarrhea, pink eye, or any other contagious condition. We do not want to expose others to illness.* If your child has some congestion (without discharge) and only slightly reduced energy, the therapist can generally work on less physically demanding tasks for that session. Please call to cancel by 8:00am on the day of therapy to avoid a charge.

## Notice to Discontinue Treatment/Change Therapy Time

If you choose to discontinue therapy or decide to change the scheduled therapy time, you will need to provide 2 weeks’ notice prior to your last session. This means that your therapist will provide 2 more sessions following the date of notification, unless you are seen more than one time per week, in which case the number of sessions will equal the 2 weeks, multiplied by the number of times you regularly receive therapy per week. Payment for the last 2 sessions will be deducted from your deposit for final treatments. If the proper notice is not provided, you will need to pay the cancellation fee for any sessions not attended.

## Late Returns

While we realize there are times a parent or caregiver may need to leave the clinic during the therapy session, we cannot have staff available and be responsible for monitoring/supervising the child once the therapy session is over. Therapy sessions are 25 or 50 minutes in length. Additional time will be charged at the regular therapy rate for late pick-up of a child.

## Email and Telephone Consultation

We would like to work cooperatively with you and other professionals (physician, teacher, other therapists) to meet your child’s needs. For many reasons including confidentiality issues, we prefer NOT to use email. There will be no charge for telephone conversations/emails that use 10 or fewer minutes, up to 4 times per year. However, consultation fees (prorated at $200 per 50 minutes) are charged for phone or email that requires longer than 15 minutes or are more frequent than 4 times per year.

## Right to Refuse or Discontinue Services

Our interpretation, recommendations and treatment plans are based, in part, on the history and information that you provide us. If information about your child’s medical/educational history, interventions and needs are withheld, misrepresented, altered or omitted, we reserve the right to terminate the services. Services may be refused or discontinued due to non-payment of services, aggressive behavior, lack of progress, lack of cooperation, or a poor match between the needs of the family and skills of the therapist.