



## **Private Pay Terms and Conditions:**

### **Payment Schedule:**

**Evaluation:** \$200.00

**Speech Therapy Session :** \$80.00 per 30 min session/ \$120.00 per hour session  
(only if time allows in therapists schedule)

**Screenings :** Free

### **Payment for Services Rendered :**

- ❖ For clients seen in **HOME:** Payment is to be paid in person via cash, check or Square or online at [www.tintalkersttherapyservices.com](http://www.tintalkersttherapyservices.com) the day of your scheduled therapy session.
- ❖ For clients seen at **DAYCARE:** It is your responsibility to make sure your payment is paid online at [www.tintalkersttherapyservices.com](http://www.tintalkersttherapyservices.com) the day of your scheduled therapy session or that payment has been paid ahead of time.
- ❖ **\*\*Please note that there are no Superbills given nor any receipts for insurance reimbursement. The only receipt you will get is if paying by credit card via Square. \*\***
- In the event that your session is cancelled or rescheduled for any reason, your payment will be applied towards that next therapy session.

I, \_\_\_\_\_ acknowledge these terms for payment and will honor it. I understand that lack of payment may cause services to terminate. I also acknowledge that excessive cancellations will result in termination of services and that **I may be charged/billed for the therapy session, if cancellations aren't made within 2 hours of the scheduled appointment.** Payment is accepted in the form of debit or credit card only which may be paid in person via Square or online at [www.tinytalkerstherapyservices.com](http://www.tinytalkerstherapyservices.com)

I also acknowledge that if my child becomes eligible for Traditional Medicaid, Peach State Health Plan, or Amerigroup, I can use this insurance coverage to cover the cost of services by notifying Tiny Talkers Therapy Services, Inc. in a timely manner. This could possibly result in a short interruption of services until insurance information is properly confirmed and verified.

Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

