

Terms & Conditions

Pediatric Speech and Language Services, Inc. knows it is important that we have some terms and conditions so that each party understands their commitment when starting and while involved in speech therapy. Please read our terms and conditions. If you have any questions we are happy to try to address them personally.

1. Payment

Payment can be made by: cash, check, or credit card.

We do bill your insurance provider directly for your convenience. You are ultimately responsible for your bill to be paid in full.

2. When to pay

Payment is required when your insurance provider does not cover part or all of the therapy services provided. Co-payments should either be paid at the time of service, or they can be billed once a month. If a family owes \$400.00 or more their services may be put on hold until their account is paid down.

3. Where to pay

Payment can be made directly to your therapist by check, mailed to PSLS at PO Box 9804, Greensboro, NC 27429, or submitted through our PayEasy Gateway on our website www.pediatricsspeechnc.com. In addition, some therapists are equipped to accept credit card payment at the time of service.

4. Failure to pay

Accounts that have not made good-faith efforts to pay for greater than 6 months may be turned over to a collections agency.

5. Cancellation of appointments by you the client

Cancellation is expected with at least 24 hours' notice.

6. Cancellation of appointments by Pediatric Speech and Language Services

If your appointment must be cancelled by Pediatric Speech and Language Services, we will aim to inform you at least 24 hours in advance and may be able to reschedule another appointment for you.

7. Regular cancellation or missing of appointments

If more than 2 sessions in a row are cancelled or missed we will discuss putting your/your child's therapy on hold until your personal circumstances permit regular attendance.

8. Other Speech Therapy

If are receiving speech and language therapy from your school system. You must inform Pediatric Speech and Language Services. The school therapist should also be informed of the involvement of Pediatric Speech and Language Services.

9. Termination of Therapy

Pediatric Speech and Language Services may terminate therapy or intervention with 24 hours' notice. The client may also terminate therapy or intervention with 24 hours' notice.

10. Data Protection

Here at Pediatric Speech and Language Services we take client confidentiality and the security of your data very seriously.

To begin therapy we require some of your person details such as: your name, address, date of birth, details of your medical provider and other professionals involved in your care, telephone and e-mail details, and insurance provider details. In some cases we may also need details of any medical interventions which you have had and the professionals involved. If we are providing therapy for your child we may additionally need information from for example your child's school or daycare.

In the best interests of your therapy we sometimes need to liaise and share information with other professionals. We will only do this with your express written permission – see our Privacy Policies.

Information stored on paper such as your case notes will be shredded seven years after the last payment for services was received.

We follow all HIPAA (Health Insurance Portability and Accountability Act of 1996) requirements for privacy.