



Payment and Cancellation Policy – Beginning January 1, 2020

A. PAYMENT: Payment for scheduled sessions for the month is requested in full at the time of the first session of each month. If your child has 4, 60-minute appointments scheduled in the month, payment in the amount of \$720 is due on the first treatment session of the month. In the event that all 4 sessions are not attended, the cancellation policy will be considered and if determined a credit will be applied the following month. Credits will be shown on your “superbill” provided at the end of the month. Your child’s treatment time may be forfeited if payment is not made in a timely manner as outlined above.

A session is considered the predetermined, scheduled amount of time (i.e. 60 minutes, 45 minutes). The service provided in this time includes pre-session greeting and check-in, Therapeutic Listening chip exchange if this is part of your program, direct clinic time, post session consultation time with the parent, and receipt of payment. Often our sessions are scheduled back-to-back so it’s important that we use our time efficiently so that we can stay on schedule. Your therapist will do their best to work within this time frame but please keep in mind that the nature of our work sometimes results in deviations from the schedule. We understand that this is true for you as well. If you are late for an appointment, please make an effort to let your therapist know your projected arrival time. We will not go over the scheduled time to make up for lost time due to tardiness but will make the most of the time we have available. If you wish to have more time to talk with your therapist, please ask them to schedule a meeting time or phone consultation.

Reimbursement: Direct payment is required for services. If you are seeking reimbursement from your insurance company for services provided by Sensory Solutions, please note that missed appointments are not reimbursable. Your monthly “superbill” will show a missed appointment on the date that is missed and you are liable for payment for the missed appointment.

B. CANCELLATIONS:

If you need to cancel an appointment please immediately call your therapist directly or leave a message on the clinic phone (408) 647-2084.

Therapy sessions are scheduled weekly or bi-weekly with a dedicated therapist who will be prepared to treat your child during the scheduled time. This time is determined based on the availability provided by the family and will remain a standing appointment. Change requests will be accommodated based on the therapist’s availability. We have made an effort to make the following policies fair to families by providing a number of sessions that may be pre-cancelled without a charge, holiday exemptions, and make up opportunities. The policies also take into consideration the needs of the therapists’ so that they may use their time productively. We also wish to avoid exposure to illness for the therapists and other clients.

Families are permitted to miss 2 scheduled appointments, provided 24 hours notice is given during each of the following seasons:

- 2 cancellations between January 1 and May 31
- 2 cancellations between June 1 and August 31
- 2 cancellations between September 1 and December 31

- *If your child is scheduled bi-weekly 2 additional session will be permitted per season.
- *If you are able to make up the appointment (based on the therapists availability) the missed appointment will not count.

A “no show” or last minute cancellation (less than 24 hours notice) will be charged at 50% of the regular therapy rate and will count toward the allotted cancellations in the “season”.

Missed **group sessions** are not refundable unless otherwise stated on the registration form.

Dyads: The rate for dyads or small groups is based on 2 or more children attending the session. For a dyad, if one child cancels due to illness the other family can choose to forgo the session (provided there is time available to notify the family) and this will be counted as one of their misses. Or, they may attend the session at the individual hourly rate.

Excess cancellations (more than those allotted for the “season”) will be billed at the regular therapy rate unless a make up session is scheduled (based on the therapist’s availability).

These holidays are not considered “missed appointments”, however it is up the discretion of your therapist to offer appointments on these dates. She will confirm the schedule in advance and is it optional for your child to schedule an appointment on these dates. If an appointment is scheduled, the cancellation policy applies.

- New Years Day
- Memorial Day
- Fourth of July
- The Friday after Thanksgiving
- The week between Christmas and New Years
- Thanksgiving Day
- Christmas Day
- Labor Day

*If you have a religious holiday that may interfere with your scheduled appointment, please notify us in advance so we can offer a make up time.

C. ILLNESS : Providing a healthy environment for our therapists and your child is a top priority. We understand that sometimes illness comes on suddenly and there is not opportunity to cancel within 24 hours. If your child has a fever within 24 hours of their scheduled appointment time, please cancel the appointment. If they are vomiting, have pink eye, diarrhea or other contagious illness please cancel their appointment immediately. If your child has clear mucus or a runny nose, mildly reduced energy, no signs of being contagious, or a minor injury your therapist can usually adjust the session to meet your child’s therapeutic needs by limiting physical activity. **Cancellations for illness concur with the outlined cancellation policy in section B.**

If your child has a prolonged illness or misses in excess of 4 sessions per season for any reason, their standing appointment may be forfeited. Every effort will be made to re-schedule your child when they are able.

If you have questions regarding these policies please let us know. Thank you!

Parent Signature

Date

Parent Signature

Date