

Walee Speech Therapy

Term and Condition Agreement



This Agreement outlines the terms and conditions for speech-language services provided by Walee Speech Therapy PC (“WST”).

By signing this Agreement, the parent or legal guardian (“Client”) of the child receiving services (“the child”) agrees to the following terms and conditions.

1. Consent to Treat

I consent to speech-language evaluation and treatment services provided by Walee Speech Therapy, PC (WST). I understand that services are individualized and outcomes may vary. No guarantee of specific results has been made.

2. Financial Agreement

All services are provided on a **private-pay basis**, unless services are authorized through a funding source such as the Regional Center (Early Start program). Please review the Fee Schedule.

All payments are **non-refundable and non-transferable**. Sessions are intended to be used within the scheduled service period and do not roll over to future months. Sessions are billed at the full session rate regardless of late arrival.

Sessions begin and end at the scheduled time. If the Client and/or the Child is not present, not ready, or arrives late, the session will still end at the originally scheduled time. No extension of time will be provided. If the clinician is unable to begin the session due to the Client not being available (e.g., not home or not ready), the session will be considered a missed session and **charged at the full session rate**.

Private Pay

- All services are private pay unless otherwise specified in writing.
- Payment is due at or before each session unless enrolled in a package or subscription plan.
- The Client agrees to pay for all services rendered, including missed sessions that fall under the cancellation/no show policy.
- WST may provide a superbill upon request.
- The Client is responsible for understanding their insurance benefits.
- WST does not guarantee reimbursement and will not sign any document that agrees to reduce the cost of services.

Regional Center (Early Start)

For the client receiving services authorized through a Regional Center:

- Services are billed directly to the Regional Center based on approved authorizations
- Families are **not responsible for payment** for authorized services
- Families remain responsible for:
 - Attending scheduled sessions
 - Providing required documentation (e.g., IFSP, authorizations)
 - Notifying WST of any changes to service authorization
 - If authorization is not active, expires, or is denied, and the Client agrees to continue the service, such service will transition to **private pay**, and the above private pay policies will apply.

No show and Late Cancellation Fees

- Cancellations made with less than 24 hours' notice and/or No show will be **charged at the full session rate** and are considered used/forfeited without notice. These sessions are not eligible for rollover, credit, or reimbursement. Make-up sessions are not guaranteed and may be offered at the sole discretion of WST based on availability.

Authorization

I authorize WST to charge my payment method for services and applicable fees without additional notice.

3. Attendance Policy

Consistent attendance is essential to support meaningful progress and continuity of care.

Caregivers are **expected to actively participate** during therapy sessions. To maintain engagement, caregivers are asked to **limit cell phone use** during sessions unless necessary.

A minimum of **24 hours' advance notice** is required to cancel or reschedule a session. If the child or a household member is ill, families should notify the clinician as soon as possible via call or text at **415-857-5783**.

Families planning an extended absence (longer than two weeks) are required to provide at least four **(4) weeks' advance notice**.

If the clinician cancels a session, a make-up session will be offered when feasible and based on availability.

All canceled sessions must be rescheduled and completed within **the same calendar month**, unless otherwise approved by WST.

The following may result in discontinuation of services:

- More than **three (3) unexcused cancellations or no-shows**
- Repeated missed or declined make-up sessions
- Ongoing lack of caregiver participation during sessions

Families who are unable to maintain consistent attendance or participation may be subject to discharge from services.

WST recognizes that unexpected circumstances may arise. When attendance challenges occur, WST will collaborate with families to problem-solve while maintaining clear expectations to support the child's progress.

5. Discharge and Termination of Services

Services may be discontinued under the following circumstances:

- **Goals Met:** The child has met their current communication goals, and continued therapy is no longer clinically indicated.
- **Clinical Determination:** The clinician determines that services are no longer the best fit for the child's needs (e.g., a different approach, provider, or level of care would better support the child).
- **Attendance Policy Violations:** Ongoing difficulty maintaining consistent attendance, including repeated missed sessions, late cancellations, or inability to participate as outlined in the Attendance Policy.
- **Financial Agreement Violations:** Failure to maintain payment responsibilities, including unpaid balances or repeated late payments.
- **Transition to Other Services:** The child transitions to another setting or provider (e.g., school-based services, another private practice, or a different therapy model) that better meets their current needs.
- **Respectful Communication and Professional Boundaries:** WST maintains a respectful, collaborative environment. Services may be discontinued if there is ongoing communication or behavior that is disrespectful, unsafe, or not aligned with maintaining a professional therapeutic relationship.

4. Client-Initiated Termination of Services

Families may choose to discontinue services at any time. To support continuity of care and scheduling stability, Walee Speech Therapy PC (WST) requires a **minimum of two (2) weeks' written notice** prior to the intended last session.

- During this notice period, scheduled sessions will continue as planned and are subject to all standard policies, including attendance and payment requirements.
- If two (2) weeks' notice is not provided, a **termination fee of \$500** will be applied to the account.

This policy allows time for appropriate transition planning, including caregiver guidance, coordination with other providers if needed, and responsible closure of services.

4. Telehealth Consent

I consent to telehealth services when appropriate and understand associated risks.

5. In-Home Liability Waiver

I acknowledge responsibility for maintaining a safe environment. WST is not liable for injuries outside clinician control.

Contact

Email: vivian@waleespeechtherapy.com | Phone: 415-857-5783

7. Governing Law

This agreement is governed by the laws of the State of California.

8. Agreement

By signing, I acknowledge that I have read and agree to all policies.

Parent/Caregiver Name: _____

Signature: _____

Date: _____