



pediatric speech therapy

Fees for Services

*Thank you for choosing Voz Speech Therapy, LLC as your speech therapy provider! We are excited to work with you and your family! By signing this form, the person responsible accepts complete responsibility for the punctual payment of all professional services provided by Voz Speech Therapy, LLC. Please see fees for services listed below:*

Comprehensive language evaluation (includes written report).....	\$475.00
Articulation or Stuttering evaluation (includes written report).....	\$375.00
Thumbs Up! complete program.....	\$400.00
Orofacial Myofunctional evaluation (includes written report).....	\$375.00
Re-evaluation.....	\$300.00
Therapy session.....	\$150.00/hr
Orofacial Myofunctional therapy session.....	\$150.00/hr
Consultation services (Potential goals, Previous evaluations).....	\$130.00/hr
Progress report/Summary of services for insurance.....	\$80.00/hr

\* Written report for evaluations include the following components: standardized testing (language, articulation), scoring, interpretation, report writing, diagnoses, consultation with teacher, family, or medical provider.

- All fees for services are due on the day or at the time services are rendered. A super bill and invoice for services rendered will be generated and provided on the 2<sup>nd</sup> of every month for your records/insurance claims.
- Payments can be made with cash, personal check or by utilizing the Client Portal on the website: <https://vozspeechtherapy.clientsecure.me> Please make personal checks to Voz Speech Therapy, LLC and include your driver's license number.
- Payments will be accepted up to 30 days after the date of service. Any payments made after 30 days are late and will incur a \$25.00 late fee each day services are not paid.
- Unfortunately, Voz Speech Therapy, LLC does not accept insurance at this time. It is the family's responsibility to save copies of all treatment notes, evaluations, progress reports, invoices and super bills to handle any insurance claims.

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Signature

\_\_\_\_\_  
Date