2025 Customer Handbook

Revised December 2024



Welcome

Welcome to Joy & Laughter Developmental Therapy

Since we began treating patients in 2012, we have aimed to provide high-quality, family-centered treatment. From your first conversation with one of our staff members, you have become a part of our family where we aim to provide solutions to help your family.

We know that quality care extends beyond the services we provide here in the clinic, which is why we hope to have your whole family become a committed part of the therapy team.

The information in this handbook will help you become familiar with some of our clinic's policies and will answer some of the questions you might have while you are working with our team. If at any time you have a question that is not addressed here, please do not hesitate to request assistance from a member of our staff.

On behalf of JLD Therapy, I personally want to extend a warm welcome and thank you for choosing to join us in helping make childhood fun for everyone!

Jennifer Davis, MS, OTR/L, SCFES, SWC, PAM

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Who We Treat

We are passionate about working with children and their families. Below are some of the more common diagnoses we have worked with, however this is not an all-inclusive list of who we are capable of working with:

- Autism
- Articulation Disorder
- Attention Deficit Disorder
- Attention Deficit Hyperactivity Disorder
- Breastfeeding Dyads
- Cerebral Palsy
- Developmental Coordination Disorder
- Down Syndrome
- Generalized Muscle Weakness
- Genetic Disorders

- Language Delay
- Mixed Expressive-Receptive Language Delay
- Oral Motor Difficulties
- Sensory Integration
- Swallowing Dysfunction
- Tongue Tie
- Toe walking
- Torticollis
- Many more!

We typically work with children under the age of 12 years old. We specialize in developmental therapy services and have found that the skills needed to treat school-aged children can vary slightly when treating older children.

By the time children reach the age of 12 years, we often want to shift to compensatory strategies or transitional skills to increase independence and get them ready for what is to come in the future. We understand transition periods can be challenging which is why it is often a transition that happens over months or years. Children who require more significant support may require transitions to happen earlier, as our clinic is geared towards young children and uses a play based approach.

Therapy Process

We are excited that you are considering choosing JLD to help support your child's care. Whether it's your first experience with therapy or you're joining us again, we wanted to guide you through what you can expect during your journey with us.

Intake Process

Every new patient must complete the intake process to ensure we have all the relevant information to make things run as smoothly as possible. After contacting the clinic, you will be sent a link to complete the online intake process. The online system makes it easy to complete all the required documents in one place. The intake paperwork takes time, but the system automatically saves your work so you can take a break if needed.

Paperwork

The online intake forms will include information about you and the child in addition to your developmental history and your concerns for therapy. If you have any previous reports, we ask that you also include that information so we can review what was previously addressed.

♦ Insurance Verification

We ask that you contact your insurance company to better learn about the coverage that is offered to you by your policy. Often, the family will get more accurate information since they are the policyholder. It is important to understand your benefits since any services that are not covered by your insurance are your financial responsibility.

When contacting the insurance company, be sure to consider asking about the following information:

- Do I have a deductible? If so, how much is it and how much has already been applied?
- Is there any copay or coinsurance due during my office visits? If so, how much?
- Do I require authorization for therapy?
- What are the maximum allowable sessions per year?
- What is my out-of-pocket maximum?
- What is my effective date?

Consultation/Fitting Call

Before we start services, we want to ensure we are a good fit for you and the child. A member of our team will contact you to review the case history information provided and discuss your

general expectations for therapy to make recommendations on the next best step. After your consultation, one of the following recommendations will be given:

- Schedule an evaluation
- Set up the first session
- Refer to other community resources

♦ Insurance Authorization

This is a conditional step depending on your insurance company. It is important for you to ask your insurance if authorization is needed when you contact them to verify your benefits. Some insurance companies will deny payment if authorization is not obtained **prior** to starting services. If this happens, you may be financially responsible for services that are not covered. Depending on your insurance provider, authorization may take 2-10 days to be received. We typically recommend that services are not started until we receive the authorization.

Someone from our team will help you in obtaining authorization if we determine that one is needed.

Prior Evaluations & Reports

We are happy to use a treatment plan that was developed by another clinic if the plan:

- was completed within the last 4-6 months.
- includes information relevant to the concerns you would like addressed.
- is completed by the appropriate professional (OT, PT, SLP).

Most of the services provided in the clinic follow the medical model which allows them to potentially be reimbursable by your insurance company. Since we provide medical-based therapy sessions, we do require that a medical therapy evaluation be completed. If the child was evaluated for an IEP (Individual Education Plan) or an IFSP (Individual Family Service Plan), these are considered educational evaluations and cannot be accepted for medical-based services. While we cannot accept these as evaluations, they are an important part of the evaluation process. We need to know what goals are being addressed in school so we don't duplicate services. Your insurance company will not cover your medical services if they are duplicating the same goals as your educational services.

If your services at the clinic are being funded by the school or the state's early intervention program, then an educational evaluation may be used since we will provide education-related services.

Initial Evaluations

Before we can start providing skilled therapy services for the child, we need to have a current evaluation and plan of care established. During your fitting call, our team noted the areas that should

be evaluated based on the information you provided in the intake forms. Depending on the complexity of the evaluation, your evaluation appointment will range from 30-120 minutes. The complexity of the evaluation will be determined by the age of the child, medical diagnoses, concerns, etc. The costs associated with the evaluations are listed in the cost of care section of this document.

During the evaluation, the evaluating therapist will typically ask that the caregiver(s) sit in during the appointment so they can ask additional follow-up questions and help to clarify various behaviors, skills, etc. Many of the assessment tools used are child-focused and will ask the child to do a variety of typical activities based on their age. The therapist is then able to use this information to determine if there is an impairment or delay.

Depending on the child and the area being assessed, the therapist may use a combination of standardized and non-standard assessments. They may also use parent questionnaires or a dynamic assessment approach to collect information about the child's ability to complete various tasks.

While we know you want the child to do well during the assessment, it is best to observe and resist helping the child unless the evaluating therapist asks for assistance or clarification. We are unable to establish a true baseline of the child's skills if you are helping them. If the child has difficulties participating during the assessment, we may ask you for information on how they do various activities at home.

If your therapist has any follow-up questions after scoring or interpreting any data from the evaluation, they will contact you for clarification. If no clarification is needed, you should expect a copy of the child's evaluation to be sent to both you and the child's doctor within 2 weeks.

First Appointment

During your first appointment, your treating therapist will discuss the goals listed in the plan of care. If your plan of care was established by another clinic, you may no longer feel that the goals listed are appropriate or your family's priorities have changed. This should be discussed with your treating therapist on the first appointment.

The therapist who completes your evaluation may not always be the same person who facilitates your ongoing sessions. We believe that a generalized approach can be beneficial to therapy. We also have licensed assistants on our staff who are specialized in providing treatment but are unable to do evaluations or develop the plan of care that will be used when working with the child.

Please note that we treat based on a clinical hour, which means the therapist should start transitioning the child out of the session 10 minutes before the end of the session. This ensures there is time for a smooth transition for the child and time for the therapist to document the session *before* the end of your session time. This means we will start to clean up and transition out 10 minutes earlier than the scheduled appointment time. During the transition time, the therapist will be able to provide a brief 2-3 minute summary of the session. If you need additional time to consult with your therapist, you are encouraged to participate in the session or book a separate consultation appointment.

The time the therapist spends documenting your session is very important. Not only are therapists ethically required to document, but your insurance company also wants to know what happened during the session. To help provide your insurance company with the most accurate documentation, some therapists may also document during the session. This ensures that the most accurate information is being reported in the daily note to reflect the child's progress.

Progress Reports

Our office will complete a progress report every 3-6 months from the time of the most recent evaluation based on the recommendations from the evaluation, insurance requirements, or if the treating therapist feels that a review is needed. During this process, the therapist will review each of the goals that have been worked on for the past several weeks to ensure progress is being made.

If the child is not making progress, the therapist will review what treatment approaches are being used to determine if adjustments need to be made. We also will ask for your feedback about how therapy is working for the child and if any of your priorities have changed.

Progress reports are an additional charge and are a mandatory part of the therapy process that cannot be waived. You can review the cost of care section below to review the costs associated with a progress report.

Re-Evaluation

Our office requires that the child be reassessed every 6-12 months. This may or may not be required by your insurance company, but we feel it is important to take a step back and reassess at least every year. If there have been significant changes in the child's abilities, or if requested by an insurance company, we may complete a reassessment more frequently.

If a reassessment is not completed at the 12-month mark, we may not be able to continue services until it has been completed. This applies to both insurance and self-pay families. Evaluations do have additional costs associated but are an important part of the therapy process to ensure we are continuing to provide medically necessary services.

We may use the same assessment tool as before so we can make comparisons; other times we may change the assessment tool to something that is more appropriate for them at that time. Often the re-evaluation is combined with a progress report so we can discuss the progress the child has made.

Consultation

As the child continues to make progress towards their goals, the need for direct treatment will decrease; your therapist may recommend that the child be moved to consultation services. Consultation services can either occur in person or via telehealth based on what the therapist feels would be the most appropriate.

Your therapist may also recommend that you receive consultation sessions in addition to the child's direct treatment time. While insurance doesn't typically cover the cost of consultations, it can be an

important part of the therapy process. Having skills carry over into the home can help accelerate progress.

Discharge

Whether the child has reached all their goals or if they have plateaued for this current period, it is important to allow the child to practice their newly learned skills before a new treatment plan is established. While some types of treatment will continue throughout the lifetime, this does not mean the child will be seen forever. When a child has plateaued in treatment, they may re-enter therapy in 6-12 months.

Discharge is an important part of the process. If therapy is continued past the point of medical necessity, insurance may request a refund for services that were previously funded.

Financial Responsibility

We are committed to helping our clients understand their financial responsibilities related to prescribed services while maximizing the insurance and/or government program benefits to which you are entitled. To ensure clarity, we have prepared this explanation of our financial policies for your review and acceptance.

Insurance or Other Program Benefits

- Before your initial evaluation or assessment, we ask that you **contact your insurance company to verify coverage** and eligibility for benefits.
- If you inform us that authorization is required for insurance-funded services, JLD Therapy staff will coordinate with your insurance company to obtain the necessary authorization.
- To protect you from unexpected charges, our team makes every effort to ensure all services are authorized prior to being provided. However, if authorization has not been obtained, we can proceed with services only if you provide written consent and accept financial responsibility for the session.
- Please remember to **inform us if your insurance plan changes** (for example, if you change jobs or your company offers a different health benefit plan).

Notifications of Insurance Changes

It is your responsibility to notify us immediately of any changes to your insurance plan, such as changes due to a new job, a shift in coverage, or updates to your company's health benefit plan. Timely notification is critical to ensure that claims are submitted correctly and on time.

- **Denied Claims**: If we bill your previous insurance and the claims are denied due to a lapse or change in coverage, you may be held financially responsible for those charges.
- **Timely Filing Constraints**: Many insurance companies have strict deadlines for claim submissions. If there is a delay in notifying us of a change in your insurance, we may be unable to submit claims to your new insurer within their required timeframe. In such cases, the patient or family will be responsible for the full cost of the services provided.

We encourage you to keep us informed of any changes to your insurance as soon as they occur to prevent unexpected financial burdens and to allow us to support you in maximizing your benefits.

Payment Responsibility

If you have insurance, you are responsible for your portion of the cost of services, which may include copayments, deductibles, coinsurances, and non-covered services.

• **Payment Requirements**: If your share of the costs is not collected at the time of service, you will receive an invoice at the beginning of each month. Invoices are due immediately upon

- receipt. If you are unable to pay within the specified time frame, you must notify JLD Therapy promptly to discuss arrangements and avoid potential collection actions or financing fees.
- **No Insurance Coverage**: If you do not have insurance or are ineligible for other program benefits, you are responsible for the full cost of services at the time they are rendered.
- Changes in Insurance: If your insurance coverage ends or changes and you fail to notify JLD Therapy, you will be responsible for all charges incurred during the lapse in coverage.

Payment Methods

JLD Therapy accepts cash, checks, and all major credit cards for payment. Checks returned due to insufficient funds ("NSF") will be assessed a return check fee.

Payment Instructions

• Payments can be made directly to JLD Therapy or mailed to our billing department at the address provided below.

JLD Therapy 2262 N. 1st Street San Jose, CA 95131

- If the child is receiving services from a JLD Therapy subcontracted provider, payments must still be mailed to JLD Therapy at the billing department address.
- Please note that treatment staff are unable to process or handle financial transactions.

Thank you for your understanding and cooperation in meeting these financial responsibilities.

Policy on Disputed Charges for Cards on File

We are committed to maintaining the trust and satisfaction of our families and will always strive to ensure that charges to the card on file are accurate and legitimate. If you believe there has been an error in billing, please contact our office immediately so we can promptly address your concerns.

However, if a family chooses to dispute a charge directly with their bank, the following policies will apply:

- 1. **Temporary Hold on Services**: All future services will be placed on hold while the dispute is under review by the bank. This process can take several weeks or months.
- 2. **Dispute Fee**: If the bank resolves the dispute in favor of our company and determines that the charge was valid, a dispute fee will be added to your account to cover administrative costs.
- 3. **Continuation of Services**: If the dispute was initiated in error, the family must place a deposit equal to the amount of the dispute to resume services.
- 4. **Schedule Adjustments**: Once the dispute is resolved, we will make every effort to accommodate the child's schedule. However, due to the hold on services, it is likely that the new service time will differ from the original schedule.

We appreciate your understanding and cooperation in helping us resolve any billing concerns efficiently.

Patient Permissions

At JLD Therapy, we require parental or guardian consent for various aspects of treatment to provide high-quality and effective care. Please review the permissions below and contact us with any questions or concerns.

Consent for Treatment

You authorize JLD Therapy and its staff to provide evaluation, treatment, and related therapeutic services for the child. This includes individual or group therapy, the use of therapeutic equipment, and interventions deemed necessary to support the child's developmental goals.

By enrolling the child in therapy and attending their sessions, you consent to the services provided by JLD Therapy across various settings, including in-home, clinic, telehealth, and community-based services.

- You have the right to discontinue services at any time if you no longer agree with the plan of care or therapeutic approach.
- If you have concerns about the services the child is receiving, please discuss them with a member of the JLD Therapy staff or leadership team.

Authorization for Communication

To provide the best possible care for the child, a collaborative approach is often essential. This may involve communication with other providers both inside and outside of our clinic, including but not limited to, school therapists, external OT, PT, or SLPs, behavioral therapists, respite care workers, doctors, and more. If there are specific individuals or entities you prefer us not to communicate with, please indicate these preferences on the Release of Information form. In the absence of such exclusions, we assume that communication regarding the child's evaluations, treatment, and related therapeutic services is permitted to ensure coordinated and effective care.

Media Consent

Photo, audio, and video documentation may be used for clinical purposes such as treatment planning and documentation review.

- Media collected for clinical purposes will not be shared outside of the clinic without your written consent.
- To ensure high quality care, recorded portions of a session may be shared with supervisors or other members of the care team to ensure the accuracy and quality of future sessions.
- Recordings may also be used internally for supervision and to ensure the accuracy and quality of future treatment sessions.
- Therapists may request permission to share exceptional photographs or moments socially; this will require separate, signed consent.

Attendance & Participation

To ensure the best care for the child, we ask that you or a designated responsible adult remain accessible during therapy sessions. If you choose to wait in the waiting room or in your car, you must be reachable by phone at all times. In the event of situations such as bathroom emergencies, injury, or extreme dysregulation, it is important for us to contact you promptly. If you are not reachable when needed, a late arrival fee may be charged, even if the scheduled session time has not yet ended.

Additionally, participation in parent training or caregiver coaching sessions is strongly encouraged, as it significantly enhances the effectiveness of the treatment and supports the child's progress. This collaborative approach between our team and your family helps maximize treatment outcomes and ensures continuity of care.

Emergency Medical Care

In the event of a medical emergency during a therapy session, you authorize JLD Therapy to seek immediate medical care for the child, including contacting emergency services (911). Every effort will be made to contact you or the listed emergency contacts promptly.

Physical Assistance Consent

The child's therapist may provide physical assistance as needed to facilitate therapy activities, which can include:

- Holding hands for balance or guiding specific movements.
- Avoiding hand-over-hand assistance; instead using a hand-under-hand approach or allowing the child to develop the motivation to participate more freely.
- Utilizing approaches such as hand-under-hand assistance to promote independence while respecting the child's sensory and neurodevelopmental needs.
- Physical restraint to prevent harm to the child or others, but only in situations involving safety risks (e.g., running toward danger or physical aggression).

At JLD Therapy, we respect body autonomy and strive to minimize physical assistance when it is not required. We also understand that various neurotypes and sensory preferences can make physical assistance more difficult. However, we also recognize that physical intervention may be necessary in certain situations, such as:

- Restraining the child to ensure their safety or the safety of others (e.g., to prevent running toward unsafe areas or objects).
- Supporting children who lack postural stability, infants, or those facing safety concerns, which may involve seatbelts or alternative methods of positioning.
- Removing a child from a situation if they attempt to harm themselves, other children, therapists, or staff.

We avoid restraining or barricading children unnecessarily and approach these scenarios thoughtfully and with care. If a child attempts to hit or hurt themselves, other clients, therapists, staff, etc., we will

first attempt to minimize environmental stimuli, but may need to physically remove them from the situation to keep others safe.

If you have concerns about the physical assistance provided by the child's therapist, we encourage you to remain present during therapy sessions to observe and discuss these matters with the therapist.

Shared Spaces Consent

Therapy sessions may occur in shared spaces where other clients, children, or adults may be present.

- Shared spaces create opportunities for natural social interactions and learning to manage distractions and common upsets of play during childhood.
- If shared spaces create discomfort or challenges, therapists will explore accommodations such as moving to a quieter area.
- Adults in shared spaces are asked to refrain from commenting on or observing children who are not their own.
- Since there are often other children in the space, video or audio recording (even if it appears to only be your child) is <u>prohibited</u>. This is for the safety and privacy of all children who may be in the space.

If someone else is making you uncomfortable, talk to your therapist to see what accommodations can be made.

Volunteers & Therapy Aides

At JLD Therapy, we believe in fostering the next generation of therapy professionals which we do in part through our volunteer program. Volunteers and therapy aides may observe or assist therapy sessions under the direct supervision of a licensed therapist. This provides valuable hands-on learning for future professionals and additional support during therapy sessions.

Volunteers help ensure a more engaging experience for the child while always maintaining the focus on their care and treatment. Volunteers bring diverse backgrounds and perspectives, which can help enrich the therapeutic process by offering new ideas and approaches, all while remaining under the supervision of licensed staff.

With additional support, the therapist can focus more on targeted interventions, while volunteers may assist with monitoring or engaging in supplementary activities.

Interns, Externs, and Fieldwork Students

As part of our efforts to develop great therapists in our community, we offer internships, externships, and fieldwork opportunities to qualified students who are pursuing careers in therapy. These students have completed various parts of their undergraduate or graduate programs and are completing a rotation with us to gain practical application skills to complement what they have been learning in school. Students deliver services under appropriate supervision, ensuring that they receive the guidance needed to develop their skills while providing valuable support to our team. Our graduate

level students are able to provide direct services to clients once they have demonstrated entry level competency.

Having students involved in the child's therapy can offer unique benefits. Interns bring fresh perspectives and innovative ideas, enhancing the overall therapeutic approach. Additionally, with more hands on deck, they can provide more individualized attention during therapy sessions. When students are participating in therapy sessions, the primary therapist is often able to provide direct consultation to parents in the absence of the child which is often not possible without our student therapists.

Assistant Therapists

JLD Therapy employs licensed therapy assistants who are trained and certified to provide skilled therapy services.

- Assistant therapists have completed college level course work in their respective therapy type and have been licensed by the state of CA to provide therapy services.
- Licensed assistants work independently based on a treatment plan designed and monitored by a supervising clinician.
- Assistant therapists are not qualified to complete evaluations independently, but may assist the evaluating or supervising therapist in the evaluation or progress reporting progress.
- Treatment plans are regularly reviewed by the clinical supervisor to ensure effectiveness.

Email Charts & Records

You have 24/7 access to the child's health records through the patient portal.

- Records can also be sent via email upon request, but please note that email is not considered a fully secure transmission method.
- For security, we may use encrypted email links with expiration times.
- Additional administrative fees may apply for sending records outside of the patient portal.

Patient Policies

Scheduling Policy

Once a therapist has developed a treatment plan for the child, we will know the recommended frequency, duration, and length of your therapy sessions. We can set up reminders for your appointment, but it is ultimately your responsibility to know when you are scheduled. We check

schedules regularly for errors, but we ask that you help by verifying your upcoming sessions on the portal. If you receive a reminder for an appointment that you will not be attending, please contact us right away so we can cancel it.

Skilled therapy services often involve one or more sessions per week, which presents a challenge for scheduling. We ask families to work with us on schedules so that each child's services can be provided by a consistent staff of professionals. We understand that every family we see has a limited amount of time to schedule therapy sessions, so our scheduling team works hard to provide the child with a therapy time that works with other appointments.

Advanced Scheduling Policy

Most families who start services choose to be placed on our advanced scheduling option, which allows them to schedule their appointments in advance at a recurring time each week with a consistent therapist. It is common for the child to be recommended for weekly services, so we will set the appointment time as a recurring series of appointments. If you need to reschedule, we will make every effort to find an alternative time. However, we kindly ask that you adjust your other commitments to avoid conflicts with your ongoing appointments.

If you regularly miss your appointment time or regularly arrive late, you may lose the option to use advanced scheduling. If your recurring appointment time isn't allowing you to attend sessions consistently, we will move you to our <u>Flexible Schedule</u> or <u>Same-Day Scheduling</u> option.

Flexible Scheduling Policy

While many families are able to schedule their appointments in advance, we understand that some may face challenges with attending sessions at a consistent time each week. To accommodate this, we offer the flexibility of scheduling your appointment at a time that is most convenient for you each week. This option is also often used for children who are only seen 1-2 times per month.

We believe it is important not to turn families away due to poor attendance, but we also want to ensure there is availability on the ongoing schedule for families committed to attending therapy sessions regularly. Families with a current plan of care who are on the waiting list for additional appointment times may also call to schedule under this policy. This helps ensure more children can receive support while awaiting access to advanced appointment times.

If a family has been placed on flexible scheduling due to poor attendance, they will be given the opportunity to go back to advanced scheduling at the end of the period (January 1st or July 1st).

When a family is placed on flexible scheduling it is **their** responsibility to contact the office each week to schedule appointments. We encourage families to try and schedule with the same 1-2 therapists for consistency.

Same-Day Scheduling Policy

For families seeking additional sessions, make-ups, or those who have difficulty scheduling in advance, we offer same-day scheduling. When you contact us, we will provide a list of available openings for that day. If calling after 5pm openings for the next day can also be provided. If a time works for you, we can reserve the appointment.

Please note that once you confirm a same-day appointment, you will have a 15-minute window to cancel or make changes. After this 15-minute window, any modifications or cancellations will be subject to the <u>cancellation policy</u> and fees may be added. Additionally, please be aware that same-day appointments are still subject to cancellation fees if changes need to be made.

Attendance Policy

JLD Therapy takes great pride in being a premier provider of pediatric therapy in Northern California. Our highly skilled therapists work hard to ensure that the child gets the best possible care and meets the goals established by your therapy team. Children who attend therapy consistently and families that practice recommended skills in between sessions make improvements faster.

While we understand that situations might arise when a therapy session needs to be canceled, this should be rare. If you want to see progress in the child's treatment plan, consistency is important. Our team monitors consistency to ensure that we are providing the best possible care to the clients we serve.

If a situation arises where a session needs to be missed, it is expected that the session is **made up** within 2 weeks of the missed session so we can be consistent with the plan of care established for the child.

We have 2 distinct periods of the year that we use to monitor attendance: January 1st to June 30th and July 1st until December 31st. During each of these periods, we require the child to attend at least 90% of the recommended sessions outlined in the plan of care.

If a plan of care recommends 1x weekly sessions, the child should be seen 26 times during a 6-month period. Since we require families to attend at least 90% of sessions, this means 23 sessions should be attended, allowing for no more than 3 missed sessions.

All missed sessions with or without notice will be counted as missed sessions. We strongly encourage all missed sessions to be made up, but understand that there are some circumstances where missed sessions can't be made. This is why we allow up to 3 sessions to be missed without make-up in each period.

If a makeup session is not scheduled and attended during the 2-week period, the missed session will then be labeled as a strike, which will then follow the "Three-Strike Policy".

Three-Strike Policy

Families who regularly skip or cancel their appointments will be removed from <u>advanced scheduling</u> so that another family has the opportunity to have the session time.

Consistency will be tracked during each of these periods of time. If the child's attendance drops below 90% of the recommended and agreed-upon therapy appointments during a given period, you will be notified that the child's attendance has been inconsistent and you will be moved to our flexible schedule.

A "strike" is a missed appointment that is not made up within 2 weeks of the missed appointment, regardless of the reason the appointment was missed in the first place.

- 1st missed appointment without makeup will be recorded in the patient record.
- 2nd missed appointment without makeup will result in a letter being sent to the family, the primary care doctor, and/or the payor to inform them that future appointments are at risk due to inconsistent attendance.
- 3rd missed appointment without makeup will result in the client being moved from <u>advanced</u> <u>scheduling</u> to <u>flexible scheduling</u>.

Vacation Policy

Vacations can be a wonderful way to practice generalizing the skills learned in therapy! If the child will be missing multiple weeks for a vacation, their appointment time may need to be given up. Many insurance companies require us to notify them if a child misses more than two weeks of sessions. If your vacation results in a break of two or more weeks, we will place your services on pause until your return. This may require you to select a new appointment time upon your return.

To avoid losing your preferred session time, we encourage you to do make-up sessions before you leave, use telehealth, and/or plan shorter vacations during the child's episode of care.

Please let us know in advance if you will be missing a session due to a vacation. If you provide us with advanced notice, we can make that time available to another child in need of a temporary session.

Cancellation Policy

When scheduling therapy sessions, please keep the following cancellation guidelines in mind:

We require a **48-hour advance notice for any changes to your scheduled appointment**. Our therapists dedicate significant time to prepare for each session, including creating materials and researching the best treatment approaches. Cancellations made with less than 48 hours' notice make it difficult for us to offer the time slot to another client in need.

Cancellations made within 48 hours of the scheduled session will incur a Cancellation Fee. This fee is not a source of profit for our office but helps cover the costs associated with reserving the time, such as the therapist's preparation, office, and administrative expenses. Cancellation fees are not

reimbursable by most insurance companies. A family may elect to pay this fee to remain on the schedule.

One fee waiver can be considered for a fee, but this will typically require a make-up session to be scheduled and attended before.

We encourage you to make up any missed sessions within two weeks to avoid the cancellation being counted as a "strike." While we will do our best to offer makeup session availability, we cannot guarantee specific times.

To cancel or reschedule an appointment, please contact us:

- Email at scheduling@JLDtherapy.com
- Call our front desk at (408) 337-2727

Short Notice Cancellation

A last-minute or short notice cancellation is defined as a session that is canceled with **less than 2 hours notice**. A short notice cancellation does not provide the clinic the opportunity to schedule another family who is waiting for the same day or flexible scheduling appointments. If the session is cancelled with less than 2 hours of advanced notice, a short notice cancellation fee will be charged.

While still considered a short notice cancellation, sessions should be canceled if the child is sick, per the specifications and JLD Therapy's <u>Sick Child Policy</u>. We understand that knowing when a child will wake up sick is unpredictable, but we ask that you notify us as soon as you know the child is sick.

If a last-minute cancellation is due to unexpected sickness, we may be able to waive the cancellation fee if a makeup session is **booked and attended within 2 weeks** of the missed appointment.

Cancellation Due to Late Arrival

Arriving at scheduled appointments on time is important. If you will be more than 5 minutes late to your scheduled appointment please notify us as soon as possible, as the session may be cancelled. If the session is cancelled due to a late arrival, a late cancellation fee will be charged. If late arrivals continue to happen we may need to discuss a change in therapy time. Please be respectful of the therapist's time and arrive on time! We welcome you to arrive early so the child can use the restroom, wait in the waiting room, or walk around the building with you.

If you are more than 5 minutes late and the therapist is still able to see you, you will still be charged a <u>late arrival fee</u>. We are unable to bill the insurance company for the time the child is not in session, so this time will need to be billed directly to you.

To cancel or reschedule an appointment, please contact us:

- Email at scheduling@JLDtherapy.com
- Call our front desk at (408) 337-2727

No-Show Policy

A no-show is a cancellation that takes place after the start of the scheduled therapy time. This may be due to the patient not showing up to their scheduled appointment or canceling the appointment when our office calls to inquire about your arrival time after the start of the session. If a client is marked as a no-show in the system, a no-show fee will be charged, and <u>all future sessions will be removed</u> until the fee is paid.

Therapist Cancellations

JLD Therapy will make every effort to notify you promptly in the event of a therapist cancellation and will offer a substitute therapist when available. If a therapist cancels, no cancellation fee will apply, as we will provide various make-up session opportunities within the typical 2-week make-up window.

Therapists are expected to notify their first patient of the day via email as soon as they know they will be canceling the session. Once office staff start their shift at 8 am they will notify families via phone to inform them of the cancelation.

If another therapist is available at the same time as the child's primary therapist, the appointment may be rebooked with the available therapist to minimize disruptions to therapy. Families will typically be notified of this change upon arrival for the session. For most children, working with different therapists can help generalize skills. However, if the primary therapist has concerns about the child's ability to generalize skills with a different therapist, the family will be contacted in advance.

While therapist cancellations do not require a make-up session, we strongly recommend scheduling one to maintain consistency with the child's treatment plan and ensure the best possible outcomes. If you notice that your therapist cancels frequently, please reach out to our office. We can work with you to explore scheduling with another therapist who may offer more consistent availability.

Late Arrival Policy

For the child to get the most benefit from their therapy session they need to be present and ready to participate. When children miss a portion of the therapy session, the treatment provided cannot be implemented as planned. If you know the child may take a while to transition, please arrive early so they will be ready to start their session on time.

We reserve the right to cancel your therapy session if you will be more than <u>5 minutes late</u>. While traffic and other situations may arise, we want to make sure we can provide a quality therapy session. If you know you will be arriving late please contact the office so we can decide what the best plan is for the day.

If the session is canceled due to your tardiness, you will be subject to the *Late Cancellation Fee*. We will do our best to schedule for a different appointment time, but this is not always possible. Also, please note that if your therapist can see the child after the 5 minute grace period, you will be responsible for paying for that missed period out of pocket. Your insurance company will not pay for services when the child is not present.

To cancel or reschedule an appointment, please contact us:

- Email at scheduling@JLDtherapy.com
- Call our front desk at (408) 337-2727

Pick Up Policy

While we request that caregivers are available and present during all therapy sessions, we understand that situations may arise that require you to step out briefly during the session. If you need to step out during your therapy session, we require that you return to the waiting area 10 min **before the end of your scheduled session** for pick up.

The exact time the therapist brings the child out will depend on how easily they transition out of the session.

This 10 minute period allows for the child to transition out of the session, time for a summary of the session from your therapist, and time for the therapist to document the session. If you are not in the waiting room on time, your therapist will not be able to provide you with a summary of the session.

If you are late to pick up the child, the therapist will no longer be available, and the child will be placed in the waiting room with a member of our administrative team. You will be charged for them providing you with childcare. Depending on how late you pick up the child, you will be charged accordingly. We will not release the child to leave on their own regardless of their age or abilities. If late pick ups become a frequent occurrence, we may need to discontinue services.

Parent participation is very important to the treatment plan. To see additional information on your role in therapy please see the <u>Parent Participation and Scope of Services</u>.

Hygiene Policy

At JLD Therapy, we prioritize the child's comfort and dignity while also promoting their independence and development. To ensure a smooth and effective therapy session, we ask that parents or guardians assist with the following toileting and hygiene guidelines:

Toileting Assistance

If the child is not independent in toileting, we ask that you be available to help the child in the restroom during therapy sessions. While preparatory activities for toileting may take place outside of the bathroom, any activities directly related to practicing toileting should occur in the presence of a parent or guardian. If a toileting

emergency arises during the session, a staff member will escort the child to the bathroom. Please note, we have staff members of all genders and cannot guarantee that the staff member escorting the child will be the same gender as the child. If you prefer not to have a staff member assist with a bathroom emergency, we encourage you to remain present during all therapy sessions to prevent this situation.

Diaper Changes

For children who use diapers, it is essential to change them promptly if they go to the bathroom during a session. This helps children become more aware of their internal cues and supports the potty training process. Additionally, many children may feel uncomfortable or may have difficulty focusing on therapy when they are in a wet or soiled diaper. We ask that you assist with diaper changes promptly when needed and have the appropriate supplies available.

Clothing Policy

Please ensure that the child wears clothing that is appropriate for active therapy sessions. Therapy may involve playing on the floor, running, jumping, or engaging in other physical activities, so clothing should allow for freedom of movement. We also use various materials such as crafting supplies, shaving cream, or water during sessions, which can sometimes result in messy situations. While most craft materials are washable, we cannot guarantee that clothing will remain unaffected. We recommend that the child wears comfortable clothing that allows for easy movement and that you won't mind if it gets a little messy.

Extra Clothing for Water Play

During water play or other activities that may cause the child to become wet, please have an extra set of clothing available. Wet clothing can be uncomfortable and may cause distress, which could impact the child's ability to participate in therapy effectively. Having dry clothes on hand will help ensure a more comfortable and productive session.

We appreciate your cooperation in helping us maintain a comfortable, respectful, and effective environment for the child's therapy sessions. If you have any questions or concerns regarding this policy, please feel free to discuss them with our team.

Modesty and Coverage

For the comfort and dignity of the child, we ask that private areas of the body, including underwear, remain covered during therapy. If the child wears skirts, dresses, or other clothing that could potentially expose their private parts during therapy activities, we recommend they wear shorts, leggings, or other appropriate coverage underneath. This will help maintain modesty while preventing any disruptions to movement during therapy, as we want the child to move freely without concern of exposure.

We appreciate your cooperation in helping us maintain a comfortable, respectful, and effective environment for the child's therapy sessions. If you have any questions or concerns regarding this policy, please feel free to discuss them with our team.

Medical Appointment Policy

For many of our school-aged children, school can be a barrier in scheduling therapy sessions. While school is an important part of a child's day, attending medically necessary therapy sessions is important as well. Most schools have a policy allowing children to miss school for medically necessary doctor, dentist, or other healthcare provider appointments. The child's therapist is a healthcare provider who provides medically necessary services, which in most instances, allows the child to miss part of the school day.

We encourage you to talk to the child's teacher to determine which parts of the day could potentially be missed for weekly medical appointments. We are able to provide the child's school with a medical note stating they are receiving services with a medical professional. We can write a note for you at each session or a note for a recurring appointment time.

After-School Policy

Sessions that happen after 2 pm or on the weekends are in high demand due to many children being in school during the day. While we can provide a medical note for sessions that cause a child to miss school, we strive to schedule appointments at times that minimize school absences. If the child is under the age of 5 years old, we strongly encourage you to schedule sessions before 2 pm.

Afternoon sessions can be challenging for children under the age of 5, as they are often napping, hungry, or tired, which limits the benefits they can gain from therapy. To ensure the best outcomes, we ask that children under 5 schedule appointments in the morning, leaving afternoon slots available for school-aged children.

Sick Child Policy

The following policy is designed to protect the health of the child, other clients, and service providers. Our staff work with multiple children each day, so preventing the spread of infectious diseases is essential to protecting everyone's health, particularly those with a reduced ability to fight infections.

When to Cancel a Session

Families must cancel therapy if a child exhibits any of the following symptoms within the past 24 hours:

- A temperature of 100°F or higher.
- Diarrhea (2 or more occurrences).
- Vomiting (1 occurrence).
- Any rash other than diaper rash.
- Eye infection.
- A severe cold with a persistent or hacking cough, or productive cough with green or yellow phlegm.
- Nasal discharge that is green or yellow.
- Extreme irritability or exhaustion.

Children must be fever-free without the use of medication for 24 hours before returning to therapy.

COVID-19 Guidelines

The rules and regulations surrounding COVID-19 may change based on local authorities' guidance. We ask all families to comply with the current local ordinances in place. If no specific local ordinances are available, please follow the general illness guidelines outlined in this handbook.

Contagious Illness in the Household

If anyone in the family is experiencing symptoms of illness, they should be kept away from our staff. Sessions should be canceled or moved to telehealth if anyone in the family has a highly contagious condition, such as:

- Pink Eye
- Strep Throat
- Head Lice
- Impetigo
- RSV
- Hand-Foot-Mouth Disease

If the child is experiencing any of these conditions but still appears well, we encourage the use of telehealth. In-person sessions can resume once the child has been cleared by a medical provider. A doctor's note should be provided to JLD Therapy before returning to therapy sessions.

Precautionary Measures

If there is any question about illness, we kindly ask that the child, caregivers, or family members wear a mask when interacting with our staff, if feasible, to minimize exposure risks. Virtual sessions may be a suitable alternative if the child is recovering but not well enough to attend in person.

Provider Discretion for Cancellations

Joy and Laughter Developmental Therapy staff reserve the right to determine if therapy should proceed when a child appears unwell. Similarly, staff will cancel sessions if they believe they might expose the child to illness. If our staff cancel a session due to their illness, a make up time will typically be offered at a similar time with another therapist.

If cancellations are due to unexpected illness, you may be eligible to have the fee waived. Please send a message and any documentation or doctor's notes to our scheduling department so we can review your situation. Our team will review your request and provide you with the outcome of our decision within 5 business days.

To cancel or reschedule an appointment, please contact us:

- Email at scheduling@JLDtherapy.com
- Call our front desk at (408) 337-2727

Payment Policy

Payment for services is due at the start of each therapy session. It is the responsibility of the family to ensure that any payment due is made prior to the session. If your insurance plan has a copay, deductible, or any other outstanding balance, payment will need to be settled before the session begins. As we do not have full access to the specifics of your insurance policy, we recommend contacting your insurance provider directly to confirm your benefits.

In the event that payment is missed, an invoice for any outstanding balance will be generated at the beginning of each month. All **invoices must be paid within 15 days** to avoid being removed from the schedule or incurring additional late fees.

Invoices and account balances are always accessible through the patient portal and can be reviewed without waiting for an invoice to be sent. While we typically email invoices at the start of each month, it is important to ensure that we have your current contact information on file. If you do not receive an email or if it is sent to your spam folder, the balance is still due by the 15th of the month. To avoid missed payments, we recommend checking the patient portal regularly for updates on your account.

Please note that your **insurance provider will not reimburse any late payment fees**. However, if your insurance company pays their portion after you have already made the payment, we will issue a refund check. Refunds are processed monthly. If you believe you are entitled to a refund, please contact our billing department at billing@JLDtherapy.com.

If an invoice remains unpaid beyond the 15-day grace period, additional late fees will start to be applied to your account. Should the balance remain unpaid for 60 days, we will refer your account to an outside collection agency, which may report the unpaid balance as delinquent on your credit report.

Invoicing Policy

At JLD Therapy, invoices are generated monthly for services provided during the prior month. Each invoice will include a detailed breakdown of charges, including session costs, any discounts applied, and payments received. If there is a remaining balance, the invoice will reflect the amount determined to be the patient's responsibility.

To make payment as convenient as possible, you can:

- Pay during your next therapy appointment.
- Submit payment over the phone.
- Use the patient portal to pay online.
- Mail a payment directly to our office.

Payment Deadlines and Late Fees

Invoices must be paid promptly to avoid late payment penalties. If you have concerns or questions about your invoice, you must reach out to clarify or correct discrepancies within **15 days** of receiving the invoice. Questions or disputes raised on or after the due date will not delay late fees from being applied.

Please note: Even if your insurance company is processing a payment, outstanding balances are subject to late fees if not resolved by the due date. If a payment is made and your insurance company later issues reimbursement, a credit will appear on your account, and we will issue a refund. Refunds are processed monthly—please contact our billing department at billing@JLDtherapy.com if you believe a refund is due.

Financial Assistance and Payment Plans

If you are experiencing financial difficulties, we encourage you to contact our billing department as soon as possible. Payment plans can often be arranged to help you manage your balance while avoiding additional fees. More information on our payment plan options is available upon request.

Timely payments and clear communication ensure that we can continue to provide the highest level of care for the child. Thank you for your understanding and cooperation.

Payment Plan Policy

At JLD Therapy, we understand that financial challenges can arise, and we are committed to working with families to ensure access to therapy services. If you are experiencing difficulty paying a large invoice, we encourage you to reach out to us promptly. Timely communication allows us to set up a payment plan and help you avoid late fees being added to your account.

Payment Plan Details

- **Fee Inclusion:** If a payment plan is established after late fees have already been added to your account, these fees can be incorporated into the plan.
- **No Financing Charges:** Payment plans with no financing charges are typically available under the following conditions:
 - Payments are made in full within **6 months** of setting up the plan.
 - Monthly payments are a minimum of \$50.
- Extended Plans: If additional time is needed, extended payment plans are available with financing fees:
 - A 9-month plan is available with a 10% financing fee applied to the total balance.
 - o A 12-month plan is available with a 20% financing fee applied to the total balance.

Terms and Conditions

- Payment plans must be set up through our billing department at billing@JLDtherapy.com or by contacting our front desk.
- Regular monthly payments are required to maintain the plan and avoid additional fees.

- We must have a credit card on file, and payments will be automatically drafted on the 5th of the month or soon after.
- Failure to adhere to the agreed-upon payment schedule may result in cancellation of the plan and reinstatement of late fees.

We strive to make therapy services accessible and manageable for all families. If you have any questions or would like to request a payment plan, please contact us as soon as possible.

Medical Records & Portal Policy

We want to make sure you have copies of important medical records produced by our office which is why we offer a convenient "patient portal" where approved family members will have access to copies of daily notes, progress reports, evaluations, and discharges. The primary person responsible for the child's care with us should have received access to the portal upon intake; if not, access can be requested.

We do not regularly print documents, as they are available through the patient portal. However, if printed copies are requested, a small fee will be applied to cover the cost of supplies (paper, ink, etc.) and a clerical fee for staff time spent locating, formatting, and printing the documents. To avoid this fee, we encourage families to use the patient portal, where documents are available 24/7 and can be easily printed or downloaded.

If you notice any errors in your medical records, please contact a member of our administrative team, and we will assist you in correcting them.

You can access the portal at https://app.fusionwebclinic.com/portal/JLDtherapy. If you need a password reset, this can typically be done directly from the portal. For further assistance with access, please contact our front desk at https://app.fusionwebclinic.com/portal/JLDtherapy. If you need a password reset, this can typically be done directly from the portal. For further assistance with access, please contact our front desk at https://app.fusionwebclinic.com/portal/JLDtherapy.

Scope of Services

Parent & Sibling Participation

Families play an essential role in reinforcing strategies and supporting skill development outside of therapy sessions. Active participation from both parents and siblings ensures consistency, strengthens the therapeutic process, and enhances progress across various settings.

Responsible Adult

A *Responsible Adult* must be present and actively participating during all therapy sessions, regardless of location (home, clinic, telehealth, school, daycare, or community settings). JLD Therapy staff do not assume responsibility for the child during sessions.

Definition of Responsible Adult:

A Responsible Adult is a person over 16 years of age authorized in writing to care for the child's health and welfare. This includes parents, grandparents, teachers, nannies/babysitters, or other designated caregivers.

Duties of the Responsible Adult:

- Oversee feeding, health, safety, and bathroom routines unless explicitly included in the child's treatment goals.
- Participate in sessions as requested by the therapist and receive feedback to communicate to the child's parent/guardian.
- Obtain information and feedback from the designated caregiver when the parent cannot attend a session. Progress reports and assessments cannot be delayed due to the primary caregiver not being present in the session.

Parent Participation

Parents/guardians are vital to therapy success. Your participation helps reinforce therapy strategies in daily routines, accelerating the child's development.

Key Responsibilities:

- Actively engage in therapy sessions as discussed with the therapist.
- Practice strategies at home to support the child's progress.
- Maintain consistent attendance to achieve therapy goals.

If a child displays aggressive or unsafe behaviors during therapy sessions, the parent or responsible adult may be asked to assist with the physical handling of the child to ensure their safety and the safety of others. This may include helping to manage the child's behavior in a calm and supportive manner as

directed by the therapist. Collaboration with parents in these situations is essential for maintaining a safe and effective therapeutic environment.

Parent Consultation

Some treatment plans include parent consultation, which provides additional training and education during the progress discussions. Consultations may also be ideal for clients who no longer require direct treatment. Our team will contact you via your preferred method (phone call or Zoom meeting). This allows families to consult with their therapists from the comfort of their homes or office.

If families have extensive questions that distract from the therapy session or need to take place without the child present, a consultation may need to be scheduled. While brief emails to the therapy providers are encouraged, long messages may require consultation time for the therapist to review and appropriately respond.

Important Notes:

- Parent consultation is not direct therapy and may not be covered by insurance.
- Additional out-of-pocket costs may apply for consultation sessions.
- Participation in therapy sessions often allows therapists to provide real-time consultation while working directly with the child.

Consultations are a convenient way for family members to gain the knowledge they want and need regarding the child's development.

Participation of Siblings

Siblings are welcome to participate in therapy sessions when appropriate, as they are part of the child's natural environment. Their involvement can support family dynamics and help achieve therapy goals, especially during group activities designed to encourage social interaction or teamwork. However, a Responsible Adult must supervise the sibling during the session and ensure their participation aligns with the therapy's focus.

<u>Siblings should not engage in free play within treatment spaces</u>, as this can disrupt the therapeutic environment and compromise the quality of care provided. If a sibling requires supervision, they should not be left unattended in the waiting room. It is the responsibility of the accompanying adult to ensure all children are appropriately supervised to maintain a safe and respectful environment for everyone.

If a sibling's presence disrupts the session or detracts from the therapeutic process, the therapist may request that the sibling not attend future sessions. In cases where siblings require additional support or therapeutic intervention, they may need their own evaluation and a separate treatment plan to address their unique needs. This ensures that all children involved receive the appropriate level of care and attention

Off-Site Services

Therapy provided outside of the clinic premises must be pre-approved by your clinical manager at least one week in advance. This policy is in place to ensure that the location is safe and appropriate for therapy sessions. By obtaining approval ahead of time, we can evaluate the setting and make sure it supports the child's therapeutic needs while maintaining a safe environment for all involved.

Participation in Transportation of Clients

Our staff are unable to provide transportation for clients or their families under any circumstances. Ensuring the safety and well-being of the child during transportation remains the responsibility of the parent or guardian. This policy allows us to focus on providing high-quality therapeutic care during scheduled sessions without taking on roles outside the scope of our services.

If community-based sessions are recommended as part of the child's treatment plan, the therapist will meet the child at the approved location. It is essential that a Responsible Adult is present at the session location to provide support as needed. Please ensure that all transportation arrangements are made ahead of time to facilitate timely and consistent attendance at therapy sessions.

Off-Site Sessions at a School or Daycare

Therapy sessions conducted in schools or daycare settings may be limited by insurance funding, as most insurance providers only cover services deemed medically necessary. Educational goals, which are often the focus in school-based settings, typically fall outside the scope of medical insurance coverage. As a result, the number of sessions or hours that can be delivered in these settings may be restricted.

While JLD Therapy is happy to collaborate with schools and daycare providers when possible, extensive school-based services may require alternative funding sources. If additional support is needed to address educational goals, families may need to seek funding through an educational payor, such as a school district or state program. For services beyond what insurance will cover, a private pay agreement may be necessary to ensure continued access to therapy in these settings.

Our goal is to work collaboratively to support the child's development across all environments, including educational settings. If school-based therapy is recommended as part of the child's care, we will provide guidance on the appropriate steps to explore funding options and coordinate with educators to achieve the best outcomes for the child.

Educational Matters

We provide medical-based services focused on the child's therapeutic needs. While we collaborate with educational teams when appropriate, we do not routinely participate in academic or educational services, as our expertise is centered on medical treatment and developmental progress.

Clinic Participation in Educational Matters

We are committed to supporting the child's development and are happy to provide collaboration on Individualized Education Plans (IEPs) based on our knowledge of the child's strengths and needs. While we do not typically attend IEP meetings, we can offer input and recommendations to assist in creating or refining the child's plan. Please note that extensive collaboration with school therapists or educators may incur additional consultation fees, as medical insurance typically does not cover non-medical services or time spent on academic-related matters when the child is not present.

If an Independent Educational Evaluation (IEE) is needed or requested, we are open to discussing this process. An IEE allows for a second opinion regarding the child's educational needs and typically requires coordination between the clinic and the school district. Before providing an IEE, the cost must be pre-approved by the school district, as they are usually responsible for funding these evaluations. Families interested in pursuing an IEE should contact both their school district and JLD Therapy to initiate the process.

By clearly defining our role in legal and educational matters, we aim to maintain focus on delivering quality care while ensuring collaboration remains efficient and aligned with the child's needs.

Legal Matters

Our staff do not typically participate in lawsuits or other legal situations, including custody cases, character statements about parents, or similar matters.

Clinic Participation on Legal Proceedings

Our primary focus is on the therapeutic progress and well-being of the child, and we believe that participating in legal disputes detracts from this objective. We do not have the full context or understanding of the home environment or the character of various individuals involved, making it inappropriate for us to provide opinions or testimony in such cases. By remaining neutral and focused on the child's therapeutic goals, we ensure that our involvement is centered on promoting their growth and development without becoming entangled in legal disputes.

Families seeking legal support may consult independent professionals who specialize in legal evaluations or custody-related matters. If treatment records or reports are needed for legal purposes, we can provide these upon request, with applicable fees, but our participation will be limited to documentation of the child's therapy progress.

Expert Witness and Legal Participation

If JLD Therapy staff are requested or subpoenaed to participate in legal proceedings as an expert witness or in any other capacity, this time will be billed at the rate of a standard therapy hour. This includes time spent preparing for and attending court, mediation, or depositions. Additional travel fees may also be required.

Please note that this service is not reimbursable by insurance and must be paid in full prior to any court or mediation appearance. Our participation will be limited to providing factual information about the

child's therapy progress and treatment, and we will not offer opinions on custody matters or character assessments of involved parties.

Letters, Statements, and Documentation for Legal or Medical Matters

If we are requested to write letters or statements related to medical necessity, legal proceedings, or other similar matters, the time spent researching, drafting, and writing the letter will be charged at our standard therapy hour rate.

Before any letter or statement is drafted, a consultation will be required to ensure a clear understanding of what is needed. This consultation will be billed at the rate listed in the cost of care document in this customer handbook. During this meeting, the time and cost for completing the letter or statement will be estimated. The estimated cost must be paid in full before the start of the project. If the time required to complete the letter exceeds the initial estimate, any additional charges must be paid before the document is provided to the requesting party.

Work Environment

JLD Therapy is committed to maintaining a professional, respectful, and safe environment for all our staff and clients. To provide a safe and harassment-free workplace for all staff. This policy applies to service environments, including your home. Harassment or discrimination of any kind, whether based on race, gender, age, disability, sexual orientation, or any other characteristic, will not be tolerated. All clients, family members, and visitors are expected to treat our therapy providers and other clients with courtesy and respect at all times.

Any behavior that threatens the safety or well-being of our staff, whether verbal, physical, or otherwise, may result in the immediate termination of services. If you have concerns about the child's therapist, we encourage you to address them in a constructive and professional manner with the child's treatment supervisor. Our priority is to ensure that therapy continues in an environment where all parties feel safe and supported.

Cultural, religion, disciplinary, and gender norms may vary between families and providers. It is important to discuss these differences openly and respectfully to ensure they are understood and considered when working with the child. This collaborative approach helps create a more personalized and effective therapy experience that aligns with your values and beliefs.

Expectations for Conduct:

- Treat all staff with respect and professionalism at all times.
- Communicate concerns in a constructive and non-threatening manner.
- Avoid any behavior that could be seen as harassment or discrimination.
- Discuss cultural, religious, or gender differences respectfully.
- Refrain from making derogatory remarks about any individual or group.
- Understand that inappropriate behavior may result in service termination.
- Report any concerns of harassment or discrimination to our leadership team.

If staff encounter unsafe or hostile conditions, JLD Therapy reserves the right to discontinue services.

Consistency is Key

Consistency is critical for therapy success. We are unable to help the child make improvements towards their goals if they are not attending scheduled and recommended therapy sessions. Missed sessions reduce progress for the child and limit access for others needing services.

We work closely with each family to create a treatment schedule that best meets your needs and supports the child's progress. Consistency in attending scheduled sessions is critical to achieving the best possible outcome. Missed or canceled sessions not only hinder the child's progress but also limit access to therapy for other children who are waiting for services.

Achieving success in therapy is a collaborative effort, and as a responsible adult, you are a key member of that team. During the child's initial evaluation, you and your treatment team will discuss concerns and set clear goals. Based on the child's unique needs, a clinical recommendation will be made for the number of treatment hours that will yield the greatest results.

While we offer appointment reminders as a courtesy, it is your responsibility to arrive on time. If a reminder is not received due to a system glitch, you are still expected to attend your appointment as scheduled. Regular attendance is vital to the child's progress, and adherence to the agreed-upon schedule is essential for success.

Scheduling Expectations:

- Follow the agreed-upon treatment schedule for optimal outcomes.
- Attend all scheduled sessions.
- If a cancellation is needed be prepared to make-up the missed appointment.
- Arrive on time. Appointment reminders are a courtesy but not guaranteed.

If a family declines the recommended treatment hours, JLD Therapy may be unable to provide services, as the desired outcomes may not be achievable.

Discontinuing Therapy Services

Discussion regarding discharging from therapy services should be had regularly to ensure everyone is in agreement with the reasons for discharging from therapy. While some children will need help throughout their lifetime, skilled therapy will not always be needed.

Reasons for Discharge:

- 1. The child achieves all treatment goals and reaches age-level milestones.
- 2. The child shows slow progress or is no longer making significant gains.
- 3. The child's progress plateaus despite therapy efforts.
- 4. The family cannot support the recommended care plan.
- 5. Attendance falls below required levels.
- 6. The family disagrees with clinic policies or procedures.

While a caregiver may not always feel ready for discharge, a therapist may still decide to move forward with ending therapy services if one of the reasons for discharge, such as meeting therapy goals

or lack of progress, is true. The decision is made with the child's best interests in mind, ensuring they receive the appropriate level of care and support needed for their continued development.

When planning for discharge, we typically follow a multi-step approach to ensure a smooth transition and continued progress at home. When a therapist feels the child is approaching discharge they will write a final episode of care which will typically be shorter than a standard episode of care. During this final episode of care, the following will take place:

- 1. **Decrease frequency** of sessions to gradually reduce the intensity of therapy.
- 2. **Discharge planning meeting** to discuss the caregiver's concerns regarding the continuation of managing goals at home.
- 3. The therapist will **create a discharge home program** to help the family manage goals independently. This typically happens 2-3 sessions before discharge.
- 4. There will be an **opportunity to discuss and practice the home program in the clinic** to ensure understanding.
- 5. Families will have the chance to **practice the home program at home** and ask any questions during the next clinical session.
- 6. A **final brief session** will allow the child to say goodbye, be recognized for their progress, and receive a success story from the parent.
- 7. A **one-month post-discharge check-in** will be scheduled to assess the child's progress and address any ongoing questions or concerns.

This approach ensures that both the child and family feel supported during the discharge process and have the tools they need for continued success.

Episodic Care: Supporting Ongoing Growth and Development

Episodic care refers to short-term therapy provided as needed at various stages of a child's development, rather than ongoing, continuous treatment. It allows for targeted intervention during times when new challenges or changes arise, such as transitions in school, changes in behavior, or the introduction of new routines.

This type of care is important because it provides flexibility to address specific needs without committing to long-term therapy. As children grow and face new developmental milestones, episodic care can offer support during times of increased difficulty, such as social, emotional, or academic challenges. By utilizing episodic care, families can ensure that their child receives the support necessary to overcome these challenges, while also promoting independence and self-management. This approach can be revisited as needed, offering a balance between intervention and the child's natural progression.

Some episodes of care may be short and high in intensity, focusing on addressing immediate, time-sensitive challenges or specific skill development. These sessions may occur over a brief period with frequent, concentrated interventions. Other episodes of care may be longer in duration, with sessions occurring 1-2 times a week, offering consistent support over a more extended period to help address ongoing or evolving challenges.

Some payor sources rely more heavily on episodic care, and in these cases, ongoing and continuous treatment may not be authorized. Insurance plans that emphasize episodic care typically provide coverage for short-term, targeted interventions rather than long-term therapy. As a result, families may need to plan for periodic episodes of care to address specific challenges, with the understanding that ongoing treatment may not be approved under these payor guidelines.

Insurance & Government Programs

JLD Therapy is a contracted provider with certain insurance carriers, as well as certain government benefit programs. JLD Therapy will bill participating insurance plans or government programs directly and accept the contractually agreed upon discount. You will be responsible for your cost-share: copayments, coinsurance, and/or deductible payments.

While certain fees may be prohibited or not be covered under specific insurance contracts, the clinic's policy regarding the discontinuation of services due to unpaid fees will still apply. Families have the option to pay these fees out-of-pocket to prevent any disruption or termination of services, ensuring continuous care for their child.

It is the responsibility of the insured party to follow up on all claim issues to seek insurance reimbursement for self-funded services. JLD Therapy will provide any necessary information for you to obtain reimbursement for the services provided to the child. It is your responsibility to track and provide evidence that your insurance Maximum Out-of-Pocket (MOOP) has been met with your insurance carrier.

Notice from the Government

"It is unlawful to routinely avoid paying your copay, deductible or coinsurance payments...even if your doctor allows it. Unless you complete a "Financial Hardship" form and qualify for financial assistance under Federal Standards, you may NOT routinely evade paying your responsibility portion for medical care as outlined in your insurance plan even if your doctor allows it. You both may be charged with breaking the law. This includes services deemed as "professional courtesy" and "TWIP's – Take what insurance pays". Failure to comply places you in violation of the following laws: Federal False Claims Act, Federal Anti Kickback Statute, Federal Insurance Fraud Laws, and State Insurance Fraud Laws, Failure to comply may result in civil money penalties (CMP) in accordance with the new provision section 1128 A (a)(5) of the Health Insurance Portability and Accountability Act of 1996 [Section 231 (h) of HIPPAA]. Exceptional cases do apply. Please see the contact info for more information. Office of Inspector General, Department of Health and Human Services. Contact by phone: 202 619-1343, by fax: 202 260-8512, by email: paffairs@oig.hhs.gov, by mail: Office of Inspector General, Office of Public Affairs, Department of Health and Human Services, Room 5541 Cohen Building, 333 Independence Avenue, S.W., Washington, D.C. 20201, Joel Schaer, Office of Counsel to the Inspector General, 202 619-0089."

Financial Hardship

If you are experiencing financial difficulties and are unable to afford the cost of our services, we have a "Financial Hardship Form" which may be filled out. If you qualify for financial assistance according to the Federal guidelines, we may legally assist you by waiving or discounting your (patient responsibility) portions of the bill. Ask the front desk person for assistance.

Regional Center Co-pay Assistance

Co-pay assistance may be available for services up to the insurance maximum out of pocket (MOOP) amount through your local regional center. To obtain a Purchase of Services (POS) for co-pay assistance, please contact your local regional center and they will help you through this process. JLD Therapy is unable to initiate this process for you, but we can provide you with some of the documents that the regional center requires upon request. Once the POS is received, you will need to notify the JLD Therapy client administration services so that we can ensure that you are not billed for these balances.

*Please note: currently regional centers are only offering co-pay assistance. They are unable to assist with any other costs shared balances (i.e. Deductible or Coinsurance).

Billing for Indirect Care

Examples of indirect care include meetings where members of the child's treatment team discuss the child's progress in their treatment plan, as well as the creation of progress reports. If the child's treatment plan is funded by a program that allows us to bill for indirect care, then the client is not responsible for the cost-share associated with indirect care. However, if they do not cover indirect care JLD Therapy will bill you directly.

The explanation of benefits (EOB) that you receive from your insurance provider may show that they had paid for dates of service where the client did not have any direct interaction with the treatment team. If a client's insurance benefit is canceled and the client does not inform JLD Therapy of the benefit cancellation, then the client or legal guardian will be responsible for payment of the direct and indirect care that is not covered by the insurance provider. Therefore, it is very important that you inform JLD Therapy immediately if the client's benefits are canceled. If JLD Therapy services are self-funded, then the child or legal guardian is responsible for payment of all direct and indirect care.

If you ever have any questions regarding the explanation of benefits (EOB) that you receive from your insurance provider or believe that you were improperly charged for services provided by JLD Therapy or one of our contracted providers, you can always call our Client Services Department for further information and support.

Refusal / Discharge from Services

Clients can be discharged from services for failure to comply with the policies of JLD Therapy, including complying with payment and attendance policies. When discontinuing services there may be fees associated with the discharge for a date you were not in the clinic. This is due to the therapist's responsibility to complete discharge paperwork.

Medical Necessity

All treatments must be justified and medically necessary for us to bill your insurance. Some of the factors that determine if treatment is medically necessary are:

- 1) Does the child's condition interfere with the quality of their life?
- 2) Does the child's condition interfere with their ability to perform at school or daily activities?
- 3) Are you motivated and able to participate in the child's treatment program and follow home and self-care instruction?
- 4) Is there potential for the child's condition to improve and/or resolve? If not, is there potential to improve the child's function or ability to perform daily activities with the use of speech therapy, occupational therapy, feeding therapy, handwriting programs, etc.?
- 5) Are there specific goals set that are measurable and trackable?

According to the terms of most insurance agreements, insurance companies are not required to cover services deemed not medically necessary, and families must assume responsibility for any unpaid balances resulting from such determinations.

If your insurance company conducts a review of past sessions and determines that services were not medically necessary, the family will become financially responsible for those services. There is no limit to how far back this can go, therefore it's important to take the therapist's advice when it may be appropriate to discontinue services.

If services are no longer medically necessary but you still feel help is needed, you are welcome to participate in our elective services such as social groups, special interest groups, handwriting programs, food exploration, movement programs, etc. payable out-of-pocket by cash, check, or credit card.

Results

The purpose of therapy is to maximize the child's unique potential by providing nurturing, individualized care. Our goal is to enhance the child's ability to perform in areas such as communication, movement, leisure activities, self-care, and emotional regulation through various therapeutic approaches. While we are dedicated to supporting the child's growth, it is important to understand that therapy outcomes cannot be precisely predicted. Some children may experience immediate benefits, while for others, progress may be more gradual, unfolding over time.

Important Notices per Payor

Medi-Cal Recipients

JLD Therapy is not directly contracted with Medi-Cal, but we are contracted with certain Managed Care Organizations (MCOs) under Medi-Cal. An MCO is a healthcare system that coordinates and manages services for its members, aiming to control costs while maintaining or improving care quality.

Since we are not directly contracted with Medi-Cal, we are unable to submit claims for services to Medi-Cal. If Medi-Cal is the child's only source of insurance coverage, we will be unable to accept you as a client, or you will be responsible for paying for all JLD Therapy services provided. If the child has both Medi-Cal and commercial insurance or their Medi-Cal has been assigned to a MCO, Medi-Cal will typically be the secondary payer, so it's important to understand the coordination of benefits to ensure claims are processed correctly.

Santa Clara Family Health Plan Patients (MCO)

Santa Clara Family Health Plan (SCFHP) typically requires authorization prior to starting services, which often takes about a week to obtain. We typically will schedule your first visit a week in advance so we can obtain authorization. If you request it to be scheduled sooner we can do so, but you may be financially responsible.

- North Easter Medical Group (NEMS)
 - No direct contract. Can provide services if elected as the delegate by Santa Clara Family Health Plan
- Physicians Medical Group (PMG)
 - No direct contract. Can provide services if elected as the delegate by Santa Clara Family Health Plan
- Palo Alto Medical Foundation (PAMF)
 - No direct contract. Can provide services if elected as the delegate by Santa Clara Family Health Plan

Valley Health Plan Patients (VHP)

Valley health plan (VHP) typically requires authorization prior to starting services, which often takes about a week to obtain. We typically will schedule your first visit a week in advance so we can obtain authorization. If you request it to be scheduled sooner we can do so, but you may be financially responsible.

Kaiser Patients (MCO or Commercial)

Kaiser Permanente requires that all services be authorized by an in-house Kaiser provider before they can be referred out to a contracted provider. If you would like to use your Kaiser benefits for therapy services, you are required to speak with an in-house provider first. Typically, the way to initiate this

process is to speak with your primary care doctor and ask for a referral to the pediatric developmental disabilities office (PDDO).

Once services have been authorized, they will send us a copy of their evaluation and your authorization number. Kaiser authorizations are written on a weekly basis, so if you would like to complete a make-up session it must be completed during the same week as the missed session. If the make-up is scheduled for the following week you would be given an additional service time in a week and it would not be covered. If this happens, it becomes the responsibility of the family to pay for additional services.

Anthem Blue Cross (Commercial only)

<u>Limitations on therapy services:</u>

Anthem Healthcare has *placed a restriction* on what they will pay for therapy services under your plan. They do not recognize the length of the session when they pay for services and pay a daily rate vs. a time based rate; there are no exceptions to this limitation.

How does this affect you?

We will continue to provide you with the best care possible despite this limitation. The good news is that our office offers 30-minute sessions which allows us to continue to contract with your insurance company. We are still able to provide you with high-quality care despite the limitations Anthem has imposed. We have found that we are still able to provide a quality therapy session in the 30-minute length which allows us to work directly with Anthem on your behalf. Please be advised, if you require services not covered by your plan (or exceed plan coverages) or you would like the additional time, you will be required to pay "out-of-pocket" for additional services.

While additional time may be convenient, helpful, and desired it is not medically necessary and therefore will not be covered. If additional time over 30 minutes is requested it will be considered elective time. By making the request for the additional time, it is assumed that you have accepted the financial liability of the additional time.

What can you do?

Should you be dissatisfied with your plan coverage or not agree with their decision you may...

- 1. Choose another healthcare insurance plan.
- 2. File a complaint voicing your disagreement with this limitation. See the contact information: https://www.anthem.com/
- 3. Call the telephone number indicated on your insurance card.

Blue Shield

While JLD Therapy is generally out of network with Blue Shield, some Blue Shield plans process claims under Anthem Blue Cross, which allows for claims to be paid at the in-network provider rate. As a company, JLD Therapy does not control how claims are processed, but you can typically find this information on the back of your insurance card.

As a courtesy, we can submit claims directly on your behalf, as we understand that determining how claims will be processed can be confusing. If the claim is processed as out of network with Blue Shield, the family will be responsible for the full cost of the therapy services provided. However, the cost may be reduced with the prompt payment discount if paid at the time of service. If you choose to take advantage of this discount, you will need to submit a self-claim to your insurance.

We have found that sometimes, when we process claims to Blue Shield on your behalf, they may send the payment directly to you instead of the clinic. If this occurs, it is important that you promptly pay the clinic for the services rendered to avoid late payment fees being added to your account. Timely payment ensures that your account remains in good standing and helps us continue to provide quality care.

Optum/United Healthcare

Limitations on therapy services:

United Healthcare has *placed a restriction* on what they will pay for therapy services under your plan. They do not recognize the length of the session when they pay for services and pay a daily rate vs. a time based rate; there are no exceptions to this limitation.

How does this affect you?

We will continue to provide you with the best care possible despite this limitation. The good news is that our office offers 30-minute sessions which allows us to continue to contract with your insurance company. We are still able to provide you with high-quality care despite the limitations United has imposed. We have found that we are still able to provide a quality therapy session in the 30-minute length which allows us to work directly with United on your behalf. Please be advised, if you require services not covered by your plan (or exceed plan coverages) or you would like the additional time, you will be required to pay "out-of-pocket" for additional services.

While additional time may be convenient, helpful, and desired it is not medically necessary and therefore will not be covered. If additional time over 30 minutes is requested it will be considered elective time. By making the request for the additional time, it is assumed that you have accepted the financial liability of the additional time.

What can you do?

Should you be dissatisfied with your plan coverage or not agree with their decision you may...

- 4. Choose another healthcare insurance plan.
- 5. File a complaint voicing your disagreement with this limitation.
- 6. Call the telephone number indicated on your insurance card.

Cigna/ASH

Our office is able to provide occupational and physical therapy services at the in-network benefit rate thanks to an agreement with American Specialty Health (ASH) and Cigna. When billing OT and PT claims for Cigna patients, the claims will be submitted and processed via ASH. While this does allow us the opportunity to provide in-network services it can cause additional oversights and barriers to payment which can affect ongoing sessions.

At this time ASH does not cover services for speech therapy nor is the Cigna panel open for us to join their network for speech therapy, therefore speech therapy services will be considered out of network until future notice.

Similarly to our PPO insurance providers, Cigna/ASH has *placed a restriction* on what they will pay for therapy services under your plan. They do not recognize the length of the session when they pay for services and therefore pay a daily rate vs. a time based rate; there are no exceptions to this limitation. This only applies to OT and PT sessions since speech sessions are considered out of network and you can pay for the session length you prefer.

How does this affect you?

We will continue to provide you with the best care possible despite this limitation. The good news is that our office offers 30-minute sessions which allows us to continue to contract with your insurance company. We are still able to provide you with high-quality care despite the limitations Cigna has imposed. We have found that we are still able to provide a quality therapy session in the 30-minute length which allows us to work directly with Cigna on your behalf. Please be advised, if you require services not covered by your plan (or exceed plan coverages) or you would like the additional time, you will be required to pay "out-of-pocket" for additional services.

While additional time may be convenient, helpful, and desired it is not medically necessary and therefore will not be covered. If additional time over 30 minutes is requested it will be considered elective time. By making the request for the additional time, it is assumed that you have accepted the financial liability of the additional time.

What can you do?

Should you be dissatisfied with your plan coverage or not agree with their decision you may...

- 7. Choose another healthcare insurance plan.
- 8. File a complaint voicing your disagreement with this limitation.
- 9. Call the telephone number indicated on your insurance card.

Regional Center

California's early intervention system is covered by several county-based regional centers. We work directly with San Andreas' Regional Center (SARC) which provides services to clients in Santa Clara County. While there are other regional centers, this is the only one we are currently working with directly.

Since the regional center is a state-funded program it is considered a payor of last resort. This means if you have a non-state-funded insurance plan you will need to use those benefits **before** using any regional center benefits. Typically the regional center will evaluate and if they make recommendations for therapy services they will provide a temporary 30-day authorization for services. During this time you will need to pursue services with your insurance company.

In order to determine eligibility for insurance-covered services, an evaluation will need to be completed and sent to the insurance company. This can happen before, concurrently, or after the regional center evaluation. While regional center services are often free to the consumer they may take

longer to get started. If you have a non-state-funded insurance plan it is recommended that you complete the medical evaluation process concurrently with the regional center process.

Regional center benefits are typically available up until the child's 3rd birthday, at which point they stop immediately. About 2-3 months before the child turns 3 we recommend speaking to someone on our administrative team about transitioning to insurance-based services if they will be needed since this process can sometimes be lengthy.

Out-of-Network Patients

While we do not work directly with your insurance company, we are dedicated to helping you maximize the benefits outlined in your policy. If you would like your insurance company to reimburse you for services, you will need to submit documentation of the services provided and the amount you paid. Our office can provide you with a "superbill" or "service summary," which includes all the necessary information typically requested by insurance providers.

Common out-of-network providers we work with include:

- Humana
- Blue Shield of California
- Health Net
- Aetna

Given the complexity of many of the children we see in our clinic, it is essential to have a therapist who specializes in pediatric care or specific conditions to ensure the best possible outcomes. Often, in-network providers do not have these specialized skills. To support you in accessing the highest level of care, many insurance plans offer a "gap extension." This extension covers the difference between the in-network and out-of-network reimbursement rates, allowing you to receive higher reimbursement for therapy services. We strongly recommend requesting this gap extension when seeking specialized therapy to maximize your coverage. Please note, this adjustment will not affect your relationship with JLD Therapy; it only impacts the coverage your insurance provides. You will still be responsible for paying for services at the time they are rendered.

Gap Coverage

Gap coverage can help with out-of-network therapy expenses by covering the costs that your primary health insurance does not fully reimburse when you receive services outside of its network. Typically, insurance plans have lower reimbursement rates for out-of-network providers, and these costs can leave you responsible for a larger portion of the bill. Gap coverage steps in to help reduce your out-of-pocket costs, such as copays, deductibles, and the portion of therapy services not covered by your insurance when seeing an out-of-network provider.

In the case of out-of-network therapy, if your insurance plan only covers a percentage of the therapy costs (or none at all), gap coverage can pay for the difference, ensuring you're not paying the full price out of pocket. However, it's important to review the terms of your gap insurance plan, as some may have specific limits on out-of-network coverage or exclusions for certain types of therapy. Gap coverage is typically designed to complement your primary insurance, filling in the gaps and minimizing the financial impact of seeing a provider who is outside your insurance network

Statement of Privacy Notice

Effective June 1, 2003

THIS NOTICE DESCRIBES HOW MEDICAL INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION. PLEASE REVIEW IT CAREFULLY.

This Notice of Privacy Practices is NOT authorization. It describes how we, our Business Associates, and their subcontractors may use and disclose your Protected Health Information to carry out treatment, payment, or healthcare operations, and for other purposes that are permitted or required by law. It also describes your rights to access and controls your Protected Health Information. "Protected Health Information" is information that identifies you individually, including demographic information that relates your past, present, or future physical or mental health condition and related health care services.

USES AND DISCLOSURES OF YOUR PROTECTED HEALTH INFORMATION

We may use and disclose your Protected Health Information in the following situations: **Treatment:** We may use or disclose your Protected Health Information to provide therapeutic treatment and/or services in order to manage and coordinate your therapy care. For example, we may share your medical information with other physicians and health care providers, DME vendors, surgery centers, hospitals, rehabilitation therapists, home health providers, laboratories, nurse case managers, worker's compensation adjusters, etc. to ensure that the medical provider has the necessary medical information to provide treatment to you.

Payment: Your Protected Health Information will be used to obtain payment for your health care services. For example, we will provide your health care plan with the information it requires prior to paying us for the services we have provided to you. This use and disclosure may also include certain activities that your health plan requires prior to approving a service, such as determining benefits eligibility and prior authorization, etc.

Health Care Operations: We may use and disclose your Protected Health Information to manage, operate, and support the business activities of our practice. These activities include, but are not limited to, quality assessment, employee review, licensing, fundraising, and conducting or arranging for other business activities. In addition, we may use a sign-in sheet at the registration desk where you will be asked to sign your name and indicate your therapist. We may also call you by name in the waiting room when your therapist is ready to see you. We may use or disclose your Protected Health Information, as necessary, to contact you to remind you of your appointment, and inform you about treatment alternatives or other health-related benefits and services that may be of interest to you.

Minors: Protected Health Information of minors will be disclosed to their parents or legal guardians unless prohibited by law.

Required by Law: We will use or disclose your Protected Health Information when required to do so by local, state, federal, and international law.

Abuse, Neglect, and Domestic Violence: Your Protected Health Information will be disclosed to the appropriate government agency if there is a belief that a patient has been or is currently the victim of abuse, neglect, or domestic violence and the patient agrees or it is required by law to do so. In addition, your information may also be disclosed when necessary to prevent a serious threat to your health or safety or the health and safety of others to someone who may be able to help prevent the threat.

Judicial and Administrative Proceedings: As sometimes required by law, we may disclose your Protected Health Information for the purpose of litigation to include: disputes and lawsuits; in response to a court or administrative order; response to a subpoena; request for discovery; or other legal processes. However, the disclosure will only be made if efforts have been made to inform you of the request or obtain an order protecting the information requested. Your information may also be disclosed if required for our legal defense in the event of a lawsuit.

Law Enforcement: We will disclose your Protected Health Information for law enforcement purposes when all applicable legal requirements have been met. This includes, but is not limited to, law enforcement due to identifying or locating a suspect, fugitive, material witness or missing person, complying with a court order or warrant, and grand jury subpoena.

Public Health: Your Protected Health Information may be disclosed and may be required by law to be disclosed for public health risks. This includes reports to the Food and Drug Administration (FDA) for the purpose of quality and safety of an FDA-regulated product or activity; to prevent or control disease; report births and deaths; reporting child abuse and/or neglect; reporting of reactions to medications or problems with health products; notification of recalls of products; reporting a person who may have been exposed to a disease or may be at risk of contracting and/or spreading a disease or condition.

Health Oversight Activities: We may disclose your Protected Health Information to a health oversight agency for audits, investigations, inspections, licensures, and other activities as authorized by law.

Inmates: If you are or become an inmate of a correctional facility or under the custody of the law, we may disclose Protected Health Information to the correctional facility if the disclosure is necessary for your institutional health care, to protect your health and safety, or to protect the health and safety of others within the correctional facility.

Military, National Security, and other Specialized Government Functions: If you are in the military or involved in national security or intelligence, we may disclose your Protected Health Information to authorized officials.

Worker's Compensation: We will disclose only the Protected Health Information necessary for Workers Compensation in compliance with Workers Compensation laws. This information may be reported to your employer and/or your employer's representative regarding an occupational injury or illness.

Practice Ownership Change: If our medical practice is sold, acquired, or merged with another entity, your protected health information will become the property of the new owner. However, you will still have the right to request copies of your records and have copies transferred to another physician.

Breach Notification Purposes: If for any reason there is an unsecured breach of your Protected Health Information, we will utilize the contact information you have provided us with to notify you of the breach, as required by law. In addition, your Protected Health Information may be disclosed as a part of the breach notification and reporting process.

Research: Your Protected Health Information may be disclosed to researchers for the purpose of conducting research when the research has been approved by an Institutional Review or Privacy Board and in compliance with the law governing research.

Business Associates: We may disclose your Protected Health Information to our business associates who provide us with services necessary to operate and function as a medical practice. We will only provide the minimum information necessary for the associate(s) to perform their functions as it relates to our business operations. For example, we may use a separate company to process our billing or transcription services that require access to a limited amount of your health information. Please know and understand that all of our business associates are obligated to comply with the same HIPAA privacy and security rules in which we are obligated. Additionally, all of our business associates are under contract with us and committed to protecting the privacy and security of your Protected Health Information.

<u>USES AND DISCLOSURES IN WHICH YOU HAVE THE RIGHT TO OBJECT AND</u> OPT-OUT

Communication with family and/or individuals involved in your care or payment of your Care: Unless you object, disclosure of your Protected Health Information may be made to a family member, friend, or other individual involved in your care or payment of your care in which you have identified.

Disaster: In the event of a disaster, your Protected Health Information may be disclosed to disaster relief organizations to coordinate your care and/or to notify family members or friends of your location and condition. Whenever possible, we will provide you with an opportunity to agree or object.

Fundraising: As necessary, we may disclose your Protected Health Information to contact you regarding fundraising events and efforts. You have the right to object or opt out of these types of communications. Please let our office know if you would NOT like to receive such communications.

USES AND DISCLOSURES THAT REQUIRE YOUR WRITTEN AUTHORIZATION

We will not disclose or use your Protected Health Information in the situations listed below without first obtaining written authorization to do so. In addition to the uses and disclosures listed below, other uses not covered in this Notice will be made only with your written authorization. If you provide us with authorization, you may revoke it at any time by submitting a request in writing:

Disclosure of Psychotherapy Notes: Unless we obtain your written authorization, in most circumstances we will not disclose your psychotherapy notes. Some circumstances in which we will disclose your psychotherapy notes include the following: for your continued treatment; training of

medical students and staff; to defend ourselves during litigation; if the law requires; health oversight activities regarding your psychotherapist; to avert a serious or imminent threat to yourself or others, and to the coroner or medical examiner upon your death.

Disclosures for marketing purposes and sale of your Protected Health Information

PROTECTED HEALTH INFORMATION AND YOUR RIGHTS

The following are statements of your rights, subject to certain limitations, with respect to your Protected Health Information:

You have the right to request restrictions on certain uses and disclosures of your health information. Please be advised, however, that we are not required to agree to the restriction that you requested.

You have the right to receive a notice of breach: In the event of a breach of your unsecured Protected Health Information, you have the right to be notified of such breach.

You have the right to obtain an electronic copy of medical records: You have the right to request an electronic copy of your medical record for yourself or to be sent to another individual or organization when your Protected Health Information is maintained in an electronic format. We will make every attempt to provide the records in the format you request; however, in the case that the information is not readily accessible or producible in the format you request, we will provide the record in a standard electronic format or a legible hard copy form. Record requests may be subject to a reasonable, cost-based fee for the work required in transmitting the electronic medical records.

You have a right to a summary or explanation of your Protected Health Information: You have the right to request only a summary of your Protected Health Information if you do not desire to obtain a copy of your entire record. You also have the option to request an explanation of the information when you request your entire record.

You have the right to inspect and copy your Protected Health Information (reasonable fees may apply): Pursuant to your written request, you have the right to inspect and copy your Protected Health Information in paper or electronic format. Under federal law, you may not inspect or copy the following types of records: psychotherapy notes, information compiled as it relates to civil, criminal, or administrative action or proceeding; information restricted by law; information related to medical research in which you have agreed to participate; information obtained under a promise of confidentiality; and information whose disclosure may result in harm or injury to yourself or others. We have up to 30 days to provide the Protected Health Information and may charge a fee for the associated costs.

You have the right to request Amendments: At any time if you believe the Protected Health Information we have on file for you is inaccurate or incomplete, you may request that we amend the information. Your request for an amendment must be submitted in writing and detail what information is inaccurate and why. Please note that a request for an amendment does not necessarily indicate the information will be amended.

You have the right to have your health information received or communicated through an alternative method or sent to an alternative location other than the usual method of communication or delivery, upon your request.

You have the right to inspect and copy your health information.

You have a right to request that we amend your protected health information. Please be advised, however, that we are not required to agree to amend your protected health information. If your request to amend your health information has been denied, you will be provided with an explanation of our denial reason(s) and information about how you can disagree with the denial.

You have a right to receive an accounting of disclosures of your protected health information made by us.

You have a right to a paper copy of this Notice of Privacy Practices at any time upon request. We reserve the right to change the terms of this notice and will notify you of such changes. We will also make copies available on our new notice if you wish to obtain one. We will not retaliate against you for filing a complaint.

If you wish to file a complaint with us, please submit it in writing to our Privacy/Compliance Officer at info@JLDtherapy.com

If you are not satisfied with the manner in which this office handles your complaint, you may submit a formal complaint with the Secretary of the United States Department of Health and Human Services, please go to the website of the Office for Civil Rights (www.hhs.gov/ocr/hipaa/), call 202-619-0257 (toll free 877-696-6775), or mail to:

Secretary of the US – Department of Health and Human Services, 200 Independence Ave S.W., Washington, D.C. 20201

If you have any questions in reference to this form, please ask to speak with our HIPAA Compliance Officer in person or by phone at the number listed below (or at the beginning of this notice).

Filing Grievances

This section describes the process by which any client of JLD Therapy may file a grievance against the organization. Any questions regarding the organization's grievance procedure may be directed towards the *Director of Operations* and our leadership team.

Internal Grievances

Although the informal resolution of program-related problems is encouraged, JLD Therapy recognizes that there may be problems requiring formal consideration and resolution. We encourage families to communicate openly and informally with treatment team supervisors. For therapy services, all concerns should be first directed to the specific therapy department managers. The grievance procedure should be used to address programmatic concerns including human rights. At any time during this process, you may contact your funding source representative or any other advocacy organization for assistance.

- 1. Any service-related problems that a participant or family member desires to have considered as a grievance should be submitted to the *Director of Operations* via email, mail, or phone. If submitted via email, please send it to leadership@JLDtherapy.com and provide a written confirmation that the grievance has been received within two working days. The *Director of Operations* will investigate the grievance and provide a full response within 10 working days of receiving the grievance. All personal rights issues will be investigated immediately.
- 2. No form of retaliation shall occur nor shall any barrier to service be created because of participant grievance.
- 3. All documentation regarding the grievance will be filed in the participant's case record.

Arbitration

In order to avoid expensive legal situations for both the clinic and the family our goal would be to use arbitration when possible to come to a quick resolution.

Dispute Resolution: Any dispute, controversy, or claim arising out of or relating to the services provided by the Clinic, including but not limited to matters involving the treatment plan, payment, or service delivery, shall be resolved exclusively through binding arbitration, rather than through litigation in court.

Arbitration Process: The arbitration shall be conducted by a neutral third-party arbitrator selected by both parties, or if the parties cannot agree, by an arbitrator selected through a process designated by the American Arbitration Association. The arbitration shall be conducted in accordance with the rules of the American Arbitration Association.

Location: The arbitration will take place in San Jose, CA, or another mutually agreed-upon location.

Final and Binding: The decision of the arbitrator shall be final and binding on both parties, with the same force and effect as a judgment rendered by a court of competent jurisdiction.

Waiver of Jury Trial: Both parties agree to waive any right to a trial by jury and agree that the arbitration decision will be final, except as provided by applicable law.

Fees and Costs: Each party shall bear its own costs and expenses, including attorneys' fees, associated with the arbitration, unless the arbitrator determines otherwise as part of the award.

Exclusions: This arbitration provision does not apply to claims involving the enforcement of a judgment or legal action not related to the Clinic's services, including actions related to the collection of debts.

Cost of Care

At JLD Therapy, we believe in transparency, which is why we provide a detailed overview of the most common costs associated with your care upfront. We will notify you as soon as possible of any changes to our pricing or if you request a service that may not be covered by your current insurance plan.

While the cost of care is consistent for all clients, the actual amount paid may vary based on negotiated rates with your insurance provider. Based on the insurance information you provide, we can offer an estimated cost, but the exact amount owed will only be determined once a claim has been processed by your insurance company. Please be aware that if your insurance does not cover any portion of the treatment for any reason, or they determine the service is not medically necessary the financial responsibility for those costs will fall to the family.

Discounts

Prompt Payment Discounts

For families paying privately for services, we offer a 15% prompt payment discount on general therapy sessions. To qualify for this discount, payment must be made in full at the time of the session, using a card on file.

Therapy Package Discounts

Additionally, we offer therapy package options, which provide significant discounts when a set number of sessions is purchased in advance. These packages are non-refundable once purchased, so it is important to discuss the recommended plan of care with your therapist to ensure it aligns with the expected frequency and duration of therapy. This will help you choose the most cost-effective package for the child's needs.

The standard therapy packages are designed for clients with a treatment plan recommending one session per week, while the advanced package is intended for those requiring two sessions per week. While the packages offer some flexibility for missed sessions, please note that make-up sessions cannot be scheduled after the package has expired. It's important to adhere to the recommended frequency of care to fully utilize the package and avoid forfeiting any sessions.

- Once purchased, therapy packages typically expire 6 months from the date of purchase. Any unused sessions will be forfeited.
- If a session is missed or canceled on short notice, a session will be deducted from the package.

Pricing

	General Therapy Sessions		
\$120	30 min	Half Hour Individual Treatment: If your plan of care recommends individual treatment your therapist will recommend the number of treatments based on the proposed treatment period. The standard therapy session consists of about 20 minutes of direct treatment time with the child, 5 minutes of collaboration and training with the parent and 5 minutes of the session is reserved for the therapist to document the session, and plan for the next session based on the progress during that day.	
\$240	60 min	Hour Individual Treatment: Clients who have multiple areas of concern often are recommended for extended treatment sessions which allows the therapist to spend additional treatment time based on the complexity of the condition being treated. Sessions will include about 50 minutes of direct treatment time, 5 minutes of collaboration and training with the parent and 5 minutes of the session will be reserved for documentation of the session, and planning for the next session based on progress during that day.	
\$160	45 min	Group Therapy: Children who are working on similar goals and who would benefit from the social aspects of working with other children may be placed in a group. Groups remain small with a max of 2-4 children per therapist. <i>There must be a minimum of 2 children present for this discount</i>	
\$60	15 min	Time Based Codes: Many of the codes we bill for therapy services include the use of time based therapy codes/CPT code. Unless otherwise specified time based codes will be assumed to be this listed price.	
\$60	15 min	Untimed Codes: Some CPT codes that are used are considered "untimed". If untimed codes are used outside of insurance, the company will assume 1 unit of an untimed code to be 15 minutes and will follow the same coding guidelines as a 1 unit time-based code.	

	Therapy Packages		
\$160	N/A	Consult Package: Oftentimes families want to go over the plan of care with the therapist to ensure understanding. This package allows up to four (4) consultation calls (10-15 minutes) per month. This package is billed on the 5th of each month regardless if the consultation calls were attended.	
Starting at \$499	N/A	Therapy Packages: This is a great opportunity for families to get a discount on services when they choose to not use their insurance coverage. These packages would be ideal for someone with a high deductible that would not otherwise be met.	
\$499	17% Discount	Starter Package 1: Five (5) half hour sessions.	
\$1,920	20% Discount	Standard Package 2: Twenty (20) half hour sessions.	
\$3,744	22% Discount	Standard Package 3: Twenty (20) hour long sessions	
\$4,050	25% Discount	Advanced 4: Forty-Five (45) half hour sessions	
\$7,884	27% Discount	Advanced 5: Forty-Five (45) hour long sessions	

Elective Services

\$35	10-15	Elective/Non-Covered Add-on: If you request to extend the length of a therapy
	min	session beyond what is medically necessary you will be responsible for paying for
		the additional time.
		* This time may be provided by a non-therapist since it is not a medical service.
\$35	10-15	Tutoring/Community Sessions: While not part of our standard offerings, if a
	min	family is requesting us to assist with tutoring, sports, handwriting, etc., pricing
		will be charged at this rate unless the program being offered has specific pricing
		associated.
		* This time may be provided by a non-therapist since it is not a medical service.
\$55	10-15	Consultation: This can take place in-person, over the phone, or online.
	min	Consultations do not include the child, and therefore are a great opportunity for
		the family and therapist to talk about the client without them present. To learn
		more read the Parent Consultation section of this handbook.
\$175	N/A	Vital Stim Application: While an effective treatment, vital stim is considered
		experimental, which requires it to be an elective service. The use of vital stim
		requires several advanced certifications and/or training and specialized equipment
		and materials. The cost for the application of vital stim is in addition to the cost of
		the therapy session (eg. 60 minute session + vital stim).

		Screenings & Evaluations
\$250	20-30 min	Screenings: A screening is an informal observation of the child that will help the therapist determine if a more comprehensive evaluation is needed. There are no written reports provided with a screening. The fees associated with this are for time spent with the child and for speaking with you afterward. Additional screening time can be scheduled at the described rate.
\$900- \$1,200	30-120 min	Initial Evaluation: Based on your concerns our team will determine what areas will need to be evaluated. Evaluations typically include the following. Chart Review Clinical Observations of the Child Standardized or Dynamic Assessment Consultation with an outside professional if needed Interpretation of assessments performed Written report Most evaluations will be charged at the base price per discipline. Specialized evaluations or evaluations where multiple assessments are required may cost more than the base price but will not exceed the max price listed. If the child was evaluated with another clinic more than 6 months ago a new initial evaluation may be needed.
		While we would like to see a copy of your school evaluation to ensure there is no duplication of services this can not be used to initiate services with us since services in the clinic are billed under the medical model and school services are under the educational model.

\$450	30-90	Re-Assessment: If your therapist feels continued service is needed after six to
	min	twelve months the child's skills will need to be re-assessed to ensure there are no
		additional underlying impairments contributing to the child's difficulties or to
		help determine the order to address identified impairments.
Starting	NA	Independent Education Evaluation (IEE): In some situations, a family may
at		request a second opinion on their child's needs related to therapy in the school.
\$2,500		Our clinic can provide this second opinion to families who were not previously
		working with our office. An IEE typically includes
		Chart review of past school reports
		Up to 2 visits to the child's school for observation
		Consultation with various school providers
		Consultation with family/caregiver to determine concerns
		Interpretation of assessment performed
		Written report
		• Up to 2 hours of attending IEP meetings (virtual)
		Onsite visits for child observations require the school or site to be within 10 miles
		of the clinic site, travel outside of a 10-mile radius will have travel fees
		associated.

	Reports		
\$160	NA	Plan of Care: If the child has recently been evaluated with another center, we may be able to use the information that they have provided. We will consider evaluations that have been completed within the last 6 months. You will need to provide this information to the therapist before your consultation, so we can determine if the appropriate information was collected based on the concerns of the child. Evaluations from outside of our clinic must be completed by the same type of credentialed professional as the type of services you are requesting with our clinic. This is a separate charge from the first therapy session, this time will be used for the therapist to interpret the evaluation from the other clinic, develop appropriate treatment goals, and discuss the plan with the family so the team can agree on the plan of care.	
\$160	NA	Progress Reporting: Our clinic will review the progress of the child's goals every 4-6 months based on the recommendations established by the plan of care. This is important for all members of the treatment team to discuss what is and is not working in the plan of care. This is a separate charge from your typical therapy session. The additional time is for therapist collaboration, assessment of the child's progress, reporting on the goals, scoring and interpreting any assessment tools used, and discussing the progress with the family so the team can agree on the plan of care.	
Starting at \$200 + \$60 per 15 min	20 min	Letter Writing: If a family is requesting a letter or specialized document outside of our typical daily notes or progress reports, there is a separate charge. Additional information can be found in the Letters, Statements and Documents of this document. The initial consultation can take up to 20 minutes, any additional consultation time will be billed at the standard consultation rate.	

		If the therapist can research and write the letter in less than 15 minutes there will be no additional charges. If it takes longer than 15 minutes there will be an additional charge of \$35 per 15 min. Any additional charges must be paid before the letter will be turned over to the parent.
\$160	NA	Discharge Reporting: Once the child has stopped receiving services with our clinic, we will complete a discharge report that will review their current level and any progress/non-progress on the goals. This is a separate charge from your typical therapy session. The additional time is for the therapist to interpret the progress, provide resources for the next actions and discuss the plan with the family so the team can discuss any recommendations after stopping therapy.
\$55	NA	Quick Discharge: Our system will trigger a therapist to write a discharge report any time a child has not been seen for a specific service for a period of 4 weeks (30 days). If the child will be missing multiple weeks of sessions due to illness or vacation, the therapist will write a quick discharge. If services are resumed within 4 months we can continue with the previous plan of care.

	Misc. Charges & Fees
\$50	Cancellation Fee: All appointment changes that are made with less than 48 hours' advance notice are subject to this fee. *If the family is unable or unwilling to pay this fee all future sessions will be removed until the start of the next period.
Cost of Session	Short Notice or Last Minute Cancellation Fee: If a patient cancels with less than 2 hours notice. *If the family is unable or unwilling to pay this fee all future sessions will be removed until the start of the next period.
Cost of Session	No-Show Fee: If the family fails to notify us they will not be attending their session, or they cancel the session after the scheduled start time. In addition to this fee all future sessions will be removed until contact with the family has been made and a solution has been discussed.
\$35	Late Arrival Fee (5+ min): If you are late for your appointment you will be charged for the portion of the session you missed. • Late arrivals may be subject to the "Short Notice Cancellation" Fee *If the family is unable or unwilling to pay this fee all future sessions will be removed until the start of the next period.
\$20+	Late Pick Up Fee: If you are not back to pick up the child at the end of the scheduled session the following fees will be charged: • 1-10 min late: \$20 • 11-20 min late: \$40 • 21-30 min late: \$60 • 30+ min late: \$60 + \$25 per additional 10 min. * After 30 minutes the authorities may also be contacted due to child abandonment. *If the family is unable or unwilling to pay this fee all future sessions will be removed until the start of the next period.
\$0.25/page	Copy Fee: If you require us to print copies of reports for you there will be a charge of \$0.25 per page copied or printed.

\$50/hr +	Clerical Fee: The time it takes a staff member to locate, format, and wait for
Postage	documents to be printed. This fee will be charged in partial hour increments if
	needed (i.e. 30 minutes= \$25, or 1 minutes= \$0.83)
	Postage: If it is being requested to have records mailed the real cost of the
	postage to mail the records will also be added into the cost of the clerical fees.
\$15 per mile	Travel Expense (0-15 miles): If you request us to provide services outside of
	our clinic, there will be a charge per mile traveled. Charges will include travel
	time both to and from the office. Mileage will be based on Google maps.
\$20 per mile	Travel Expense (15-30 miles): Travel outside of our typical 15-mile radius
	will require an additional cost per mile due to possible unknown delays.
Call for price	Travel 30+ Miles: Travel greater than 30 miles is considered out of the area
	and may require flights, hotels, and/or misc. allowances. Please contact the
	office to discuss the needs of your travel request and we will try to make
	accommodations.
\$450	IEP/IFSP Attendance: Price includes up to 2 hours of attendance of the
	meeting. Travel fees will also be applied.
	 Additional time: Billed at \$120 per 30 min

	Late Payment Penalties
No Fee	0-14 Open Invoice: Invoices are due the day they are sent but we allow up to 15 days before any late payment fees are added.
\$25	15 Days Overdue: If an invoice remains open after 15 days a late payment fee of \$25 will be added to the cost of the invoice.
+\$25	30 Day Overdue: If after 30 days the invoice remains open an additional late payment fee will be added to the account.
+\$25	45 Day Overdue: If after 45 days the invoice continues to remain unpaid an additional late payment fee will again be added to the account.
+\$50	60 Day Overdue: If after 60 days the account is still open a final late payment fee will be added and the account will be turned over to a collections agency for further collections efforts. The delinquent payment will also be reported to the credit bureau.
\$50	Returned Check Fee: If we are unable to cash a check that was given to us for payment due to insufficient funds or other reasons listed by the bank the patient account will be charged \$50 or the amount charged to us for the returned check fee. If the invoice becomes late while waiting for a new payment method late fees may also be assessed.
\$100	Disputed Payment Fee: If a payment is disputed with the bank and it is found that the payment is valid a fee will be added to the account due to the company needing to respond to the disputed fee.

Contact Information

Corporate & Billing Address:

2262 N. 1st St. San Jose, CA 95131

Treatment Location Address:

2270 N. 1st St. San Jose, CA 95131

Phone Number: Fax Number: 408-337-2727 408-478-4130

Important Emails:

<u>Hello@JLDtherapy.com</u> If you would like to know more about our clinic or the programs that we have to offer. Also, receive updates on any services being offered by our clinic.

Scheduling@JLDtherapy.com If you need to set up or cancel an appointment for the child, feel free to message us at any time of the day with your needs.

Auths@JLDtherapy.com If a prior authorization is required for the child's services, our authorization team will help you with the process. Please feel free to message us at any time of the day with your needs.

<u>Billing@JLDtherapy.com</u> If you have questions or concerns about the payment of your invoices or the claims that have been sent to your insurance company, feel free to message us at any time of the day with your needs.

<u>Leadership@JLDtherapy.com</u> If you have any concerns about the quality of care the child is receiving or how a staff member handled a situation, we want to know about it. Our leadership team includes the managers of administration and clinical areas, so feel free to message us at any time of the day with your needs.

Marketing@JLDtherapy.com If you have pictures of the child working on skills related to therapy, please send them to us. We love seeing pictures of your kids, whether it's in session, at home, or in the community. Posting these on our various social media channels not only allows us to celebrate the child, but allows other families just like yours to know there is help available. Share your pictures, success stories, and ideas on events we should attend.

HR@JLDtherapy.com If you have ever considered working where your child receives services, we offer a variety of positions including administrative, marketing, billing, leadership, and clinical roles. We love to hire people who understand the children and families we help. Please feel free to message us at any time of the day with your needs.

<u>Volunteers@JLDtherapy.com</u> If you are looking to gain volunteer hours or experience in the field of occupational, physical, or speech therapy, we are happy to help. We also accept high school students (18+) for volunteer hours in our administration department.

<u>Students@JLDtherapy.com</u> If you need a practical experience as part of your graduate or undergraduate program we are happy to discuss internship, externship or fieldwork opportunities. Please feel free to message us at any time of the day with your needs.