

Chris Zwolfer, MA, CCC-SLP

Pediatric Speech and Language Services
445 Indian Peaks Trail West, Lafayette, CO 80026
303-918-1822
NPI # 1659711430

Colorado License # SLP0000076

Payment Policy: Insurance Billing

Thank you for choosing Chris Zwolfer, MA, CCC-SLP for your speech-language pathology needs. This is an agreement between Chris Zwolfer, MA, CCC-SLP and you for payment of services provided. By signing this agreement, you are agreeing to pay for all services provided to your child.

Please read the following information carefully.

If you want Chris Zwolfer, MA, CCC-SLP to bill your insurance for evaluations and treatment, you need to:

- Provide your primary and/or secondary insurance card and information for billing.
- Let Chris Zwolfer know if your insurance changes.
- Check with your insurance company before your first visit to find out what speech and language services they will pay for.
- Find out what information the insurance company needs and bring it with you to your first appointment.
 - You may need a note from your doctor, called a referral, or permission from the insurance company, called pre-authorization.
 - Referrals and pre-authorizations do not guarantee that insurance will pay for services.
- Pay all co-pays, deductibles, and non-covered services.
 - A claim will be submitted to your primary insurance company. If denied, a claim will be submitted to your secondary insurance company.
 - If your primary and/or secondary insurance will not pay for services you will be responsible for paying the amount not reimbursed.
 - If your insurance company does not pay us within 60 days, you will be billed for the full amount. If we get paid by the insurance company after that, we will return your payment.*
- Pay any money owed within 30 days of receiving a bill from Chris Zwolfer, MA, CCC-SLP.

If you do not have insurance:

- Payment is due at the time of service. I accept cash, checks, cashier's checks, or major credit cards.

Returned checks:

- You will be charged a \$25 fee for each returned check.
- You will be asked to bring cash in to Chris Zwolfer, MA, CCC-SLP to cover the amount of the returned check and the fee.

Patient's Name

I agree to the payment policies outlined above.

Patient or Parent/Guardian Signature

Date

Relationship to Patient