

WELCOME TO OUR OFFICE

This information sheet is designed to answer questions you may have regarding your care. We take great pride in the training, knowledge, and capabilities of our staff and we want you to know that we are dedicated to giving you quality care.

**OFFICE HOURS**

Regular office hours are 8:00 am to 5:00 pm Monday through Friday. We will make every effort to see you at the scheduled time. In order to maintain other patients’ schedules, your promptness is appreciated. We believe strongly in the value of your time and will do our best to keep you from having to wait.

**CANCELLATIONS**

Because of frequent last-minute cancellations, it has become necessary to require 24-hour notice before any missed appointments. This will allow us to schedule other patients who are waiting for appointment times and it will also prevent unnecessary time spent in preparation for a missed appointment. **Patients may be billed a fee of $25.00 for “no-show” or appointments which are missed and not canceled 24 hours priors to the scheduled time.** We have a 24-hour answering service; therefore, calls made to cancel or reschedule an appointment may be made at any time by calling our office. For the benefit of other patients in need of our services, any patient who missed two (2) sessions without advance notice will be notified that they will be discharged from our service after one (1) more absence for which the therapist is not given at least 24 hours’ notice.

**PAYMENT POLICY**

Co-pays and fees are due and payable at the time of visit. If you are scheduled twice weekly, for your convenience, you may pay once a week. We bill insurance on a daily basis. Your co-pay and deductible are due at the time of your appointment. We will be happy to discuss other payment arrangements if needed. If you have any questions regarding these arrangements or your account, please contact our office.

**ONLINE STATEMENTS**

Statements are sent out via email to the primary email documented in your file. We will no longer print statements. The email will come from Hearing and Speech Connection. Please check your email. Due dates for all parents will be the 15th of the month.

Your signature indicates that you have read and understand our office policies. If you have any questions, please do not hesitate to ask.

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Signature Date

BILLINGS

2625 Grand Ave, Billings MT 59102

406-969-2770

MILES CITY

2600 Wilson St, Miles City MT 59301

406-233-4327

 [hascmt.com/speech](http://hearingandspeechconnection.com)

GLENDIVE

202 Prospect Dr. Glendive MT 59330

406-382-3220