



Cancellation Policy

NO SHOW/LATE CANCELLATION (\$1CHARGE) CANCELLATIONS AND MISSED APPOINTMENTS

The client is expected to attend each scheduled session on time. A canceled or delayed appointment delays our work and can negatively impact other clients. Since your appointments involve the reservation of time specifically for you, and out of respect for your therapist and our other clients, a minimum of 24 hours' notice is required for rescheduling or canceling an appointment. Please contact the office at (860)634-8768 or your therapist directly to do so.

WHEN THE NO SHOW/LATE CANCEL FEE IS WAIVED

The only exception to this cancellation policy is in the event of a serious or contagious illness or emergency. We offer one grace for these purposes every six months. Some examples of emergencies are car accidents, deaths in the family or extreme illness. Work issues do not constitute emergencies. This cancellation policy also applies even if missing the appointment was an unintentional act.

FREQUENT CANCELLATIONS OR MISSED APPOINTMENT

Frequent cancellations (3 or more in 6 months or 2 consecutive) and/or missed appointments (no show) will result in the termination of treatment. If you have arranged with your therapist to have recurring appointments, the next recurring appointment will stay in the calendar. Therefore, please call the office or your therapist directly if you choose to cancel that appointment to avoid a second No Show/Late Cancel charge of \$100. A voicemail is sufficient as they are dated, and time stamped. The recurring appointment will be removed after the second consecutive No Show/Late Cancel.

FEES FOR NO-SHOWS & LATE CANCELLATIONS

No-Show Fees: Anytime you fail to attend a scheduled appointment without giving appropriate prior notice of cancellation, **you will be charged \$100 for the no show session**. The credit card information or other payment information you previously provided will be used to process this payment. By providing us with your credit card information or booking an appointment, you consent to this policy. Multiple no-shows will result in the termination of therapy.

Late Cancellation Fees: Any session that is missed by canceling less than 24 hours in advance **will be charged a \$100 fee**. You will be charged even if the cancellation is work related and even if you rescheduled the appointment. The credit card information you previously provided will be used to process this payment. By providing us with your credit card information or booking an appointment, you consent to this policy. Repeated late cancellations (more than two) may result in the termination of therapy. Multiple no-shows will result in the termination of therapy.

You should note that insurance companies generally do not reimburse for missed appointments.

WAIT TIME/GRACE PERIOD

Your wait time is kept to a minimum. Due to the length of time provided for each appointment, it is critical that you arrive on time for your appointments. ***If you are more than 15 minutes late to your appointment, we will have no choice but to reschedule your appointment and you will be responsible for the \$100 fee of a no show.*** To avoid paying no show fees, we require at least twenty-four (24) hours' notice for all cancellations (as described above). Both therapist and client have a grace period of 15 minutes.

CLIENTS WITH MEDICAID

Please note that the fees described in this policy cannot be applied to clients with Medicaid insurance. Thus, clients with Medicaid insurance who have three or more late cancellations or missed sessions will be referred to other providers should there be any indication that the pattern will continue.

THANK YOU!