



## Financial Responsibility Agreement

*The University Center for Language and Literacy (UCLL) is a non-participating, non-contracted freestanding outpatient speech-language provider with ALL insurance companies including Medicare and Medicaid.*

*(Please initial each statement as you agree)*

\_\_\_\_\_ I assume full **FINANCIAL RESPONSIBILITY FOR PAYMENT** of all expenses associated with my therapy and care, including any portion not paid by insurance, worker's compensation, or social agencies, and agree to pay the same amount at the conclusion of therapy unless other arrangements have been made prior to my admission to the University of Michigan Center for Language and Literacy.

\_\_\_\_\_ I certify that I have read the fee schedule or that it has been read to me and understand its contents.

\_\_\_\_\_ **I understand that I am financially responsible for all charges in full.**

\_\_\_\_\_ It is your responsibility to know your insurance coverage. In order to assist you, the staff at UCLL will obtain a quote of your health insurance benefits, however, benefits are not a guarantee of insurance payments, nor will they be used as payment for services. **Insurance payments are solely for client reimbursement after UCLL has received payment in full.**

\_\_\_\_\_ I authorize the University Center for Language and Literacy to release all pertinent medical information to insurance companies and agencies as necessary to assist you with billing and collection purposes. This assignment will remain in effect until revoked by me in writing. A photocopy of this assignment is to be considered as valid as the original. All insurance payments are direct reimbursements to the policyholder.

\_\_\_\_\_ I certify that I have read this form or that it has been read to me and understand its contents.

**AGREEMENT SIGNED BY A LEGAL REPRESENTATIVE MUST INCLUDE A COPY OF THE GUARDIANSHIP PAPERS OR A POWER OF ATTORNEY.**

\_\_\_\_\_  
Signature of client, parent, legal guardian or responsible party:

\_\_\_\_\_  
Date: