

The House of Gladness LLC

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The House of Gladness LLC

Policies and Procedures

I. MUSIC THERAPY & PROVIDER QUALIFICATIONS

A. The American Music Therapy Association (AMTA) defines Music Therapy as the "...clinical & evidence-based use of music interventions to accomplish individualized goals within a therapeutic relationship by a credentialed professional who has completed an approved music therapy program." Services will only be provided to clients of The House of Gladness, LLC by employed or contracted music therapists holding the MT-BC (Music Therapist-Board Certified) credential.

II. DESCRIPTION OF AVAILABLE SERVICES

All services will take place in The House of Gladness, LLC office OR other location mutually agreed upon by the service provider and the client.

A. 1:1 MUSIC THERAPY SERVICES

Individual music therapy services ranging from 30-60 minutes in length. Following the in person session, time is reserved for therapist planning, documentation, and communication. In the first 1-2 sessions, the therapist will assess the client and develop a treatment plan consisting of the client's goals and objectives and recommendations for frequency/length of sessions. In music therapy, the goal is not to learn how to play music; the music therapist will develop music based interventions and experiences to help the client meet their non-musical goals.

B. GROUP MUSIC THERAPY SERVICES

The policies and procedures for 1:1 Music Therapy services also apply to group services, but rates/session lengths will be determined on a case by case basis. Currently, outside of community based groups offered at therapeutic facilities, we do not have any established groups. If you are interested in establishing a music therapy group OR if you would like to be notified in the event that we are able to offer group sessions in the future, please contact us.

C. ADAPTED LESSONS

Adapted lessons are also facilitated by music therapists, but are not considered music therapy. Clients receiving adapted lessons do not have a treatment plan with individualized goals. Adapted lessons are tailored to the client's needs and preferences and use non-traditional methods to teach music.

III. RATES

Total Service Time (min)	Private Pay Rate	*FES-UA Rate
60 (Music Therapy Assessment)	\$95.00	\$95.00
30 (Music Therapy)	\$70.00	\$70.00
45 (Music Therapy)	\$85.00	\$85.00
60 (Music Therapy)	\$100.00	\$100.00
30 (Adapted Lesson ONLY)	\$40.00	_
45 (Adapted Lesson ONLY)	\$50.00	_
60 (Adapted Lesson ONLY)	\$60.00	_

*Family Empowerment Scholarship for Students with Unique Abilities

**Please note that we are only approved as music therapy providers through FES-UA.

IV. BILLING

A. CMS/SUNSHINE HEALTH INSURANCE

CMS/Sunshine Health partners with MTM to create a network of providers of various services, including music therapy. To proceed with music therapy services through CMS/Sunshine, your child's PCP will need to complete the form titled "Sunshine Health Expressive Therapy Outpatient Form", which should be provided to you during the intake

process. You may also request this form if you have not received it. To complete the process, you must bring the outpatient form to your PCP to be completed and faxed to Sunshine Health at the following fax number: 866-796-0526. Please be advised that there is an expected wait period for the approval process. Please notify The House of Gladness, LLC once forms have been submitted in order to complete follow up with Sunshine Health.

If you are choosing to receive services through CMS/Sunshine, you will not be able to begin services until The House of Gladness, LLC receives authorization directly from MTM.

Individual sessions through CMS/Sunshine are typically 30-45 minutes of direct service with 10-15 minutes used for documenting. The House of Gladness, LLC will NOT bill clients of CMS/Sunshine directly for services; all billing will be done through MTM. The House of Gladness, LLC cannot charge clients of CMS/Sunshine directly for any reason including late fees and/or cancellation fees. The House of Gladness, LLC requests that in the event of a cancellation, 24 hours notice be given unless in the instance of an emergency or illness. In the event of frequent cancellations without 24-hours written notice from the canceling party, The House of Gladness, LLC reserves the right to terminate or suspend services with at least 14 calendar days written notice. Termination or suspension of services will be decided at the therapist's discretion.

B. STEP UP FOR STUDENTS (FES-UA)

In order for The House of Gladness, LLC to invoice EMA, you must complete form "2025 HIPAA Release of Information". The House of Gladness, LLC will not receive payment for services until you have requested the service in EMA and the service has been completed. You are responsible for requesting services in a timely manner; requests not made within 7 business days of service completion may result in a suspension of services until the request is completed. For families using the new EMA system, you will first need to search for "The House of Gladness, LLC" in your EMA portal and request services. Once your request is accepted, The House of Gladness, LLC will be able to bill EMA directly for services.

C. PRIVATE PAY/SELF PAY

Billing frequency will be determined automatically based on your child's session frequency. If you would like to change your billing frequency, please reach out to your assigned therapist. The House of Gladness, LLC reserves the right to modify billing schedules and agrees to provide at least 10 business days notice. In the event that your billing date falls on a holiday, your invoice will be generated on the following business day. Payment is accepted online or in person and is due in full within 10 business days of receiving the invoice. The invoice will be emailed to you to include a payment link. It will be your responsibility to monitor your invoices. If you do not agree to receive PHI via email in the "Release of Information: HIPAA AUTHORIZATION FOR USE OR DISCLOSURE OF HEALTH INFORMATION 2025" form, you may not receive email or text reminders regarding your balance or new invoices. You may make other arrangements with your therapist to pay in person if you would prefer. Payment is also accepted via cash or check; please make checks payable to

"The House of Gladness, LLC". If you would like a receipt sent to your email, please notify your child's treating therapist.

The House of Gladness, LLC reserves the right to suspend or terminate services due to late or incomplete payments at the therapist's discretion.

V. ELECTRONIC TRANSMISSION OF PHI (THERANEST PORTAL)

The House of Gladness, LLC therapists use Simple Practice for HIPAA compliant client communication, scheduling, documentation, and billing. A portal account is required for therapist use, but you may choose to send/receive PHI in other ways if you prefer (e-mail, text, Messenger, etc.) by signing form "Release of Information: HIPAA AUTHORIZATION FOR USE OR DISCLOSURE OF HEALTH INFORMATION 2025".

VI. TERM OF AGREEMENT

This Agreement will become effective immediately after signing. The House of Gladness LLC may terminate services with 30-days written notice. All attempts will be made to give you the names of other qualified professionals. You have the right to terminate services at any time by providing notice in writing. The House of Gladness, LLC shall be entitled to full payment for services performed prior to the effective date of termination. The cancellation policy also applies to termination; at least twenty-four (24) hours advance notice is required.

VII. SCHEDULING

The House of Gladness, LLC official days of operation are Monday-Friday by appointment. Therapists are contracted and determine their own service schedule. Services may not be available every weekday depending on your assigned therapist. Upon completion of intake paperwork, your assigned therapist will contact you to schedule services.

VIII. CANCELLATION POLICY

The health and safety of all of our clients and their families is the top priority of therapists at The House of Gladness, LLC. In the event that a child becomes ill within 48 hours of receiving services, we request that you notify The House of Gladness, LLC so that we can determine the best course of action for the therapist. Because we may have some clients that are at a higher risk of serious complications, it is important for therapists to be informed so that they can communicate with these clients and their families to determine if services need to be rescheduled or if the therapist needs to quarantine. In the event that a therapist arrives to a session and a child is visibly ill, the therapist reserves the right to cancel at their own discretion for their safety and for the safety of their other clients

A. PRIVATE PAY/SCHOLARSHIP

The House of Gladness, LLC requires 24 hours written notice for any cancellations/rescheduling needs, except for in the instance of extenuating circumstances

such as illness, family emergency, or natural disaster. In the event that a therapist arrives at the mutually agreed upon service location at the scheduled time and the client is not present, they will be considered a "no-show" after 15 minutes. After 15 minutes, the therapist may choose to leave and will not be penalized. The therapist reserves the right to suspend or terminate services for repeated no-shows without advance notice or appropriate communication.

B. CMS/SUNSHINE HEALTH

The House of Gladness, LLC cannot charge clients of CMS/Sunshine directly for any reason including late fees and/or cancellation fees. The House of Gladness, LLC requests that in the event of a cancellation, 24 hours notice be given unless in the instance of an emergency or illness. In the event of frequent cancellations without 24-hours written notice from the canceling party and/or no-shows, The House of Gladness, LLC reserves the right to terminate or suspend services with at least 14 calendar days written notice. Termination or suspension of services will be decided at the therapist's discretion.

IX. TERMINATION/SUSPENSION OF SERVICES

In the event that services are suspended due to lack of payment, the therapist will notify the client in writing of the suspension date and requirements for resuming services. Once an invoice is 30 business days past-due, the therapist reserves the right to immediately suspend services.. In the event that services are terminated due to lack of payment, The House of Gladness, LLC reserves the right to pursue legal action in order to receive payment for all services provided and late fees.

X. RIGHTS AND RESPONSIBILITIES

Your Rights as a Client/Parent/Legal Guardian:

- Refuse and/or terminate services at any time.
- The only requirement is that you pay for any services you have already received and provide at least twenty-four (24) hours advance notice.
- A safe setting, free from sexual, physical, and emotional abuse. Ask for and receive information about my qualifications (e.g. certifications, education, training, experience, membership in professional groups, special areas of practice, and limits on practice).
- Have written information, before entering therapy or lessons, about fees, confidentiality, method of payment, and cancellation policies. This is known as informed consent.
 - Request a second opinion.
- File a complaint with the government or my professional association if you believe that you have been treated unethically.
- Refuse to answer any questions or give any information you choose not to answer or give.
 - Share with me aspects of our sessions that you believe are helpful for your child and which aspects are not.
 - Keep what you tell us private. Generally, information you or your child reveal to me during music therapy sessions will be kept strictly confidential (understanding that any

pertinent information relative to your child's care will be documented in a The House of Gladness, LLC progress note record) and will not be revealed without your written authorization.

- There are some situations in which I am required by law to reveal things you tell me, even without your permission. These include:
 - o If you seriously threaten to harm another person, I must warn that person and the authorities.
 - If a court orders me to testify about you.
 - If I have good reason to believe you are abusing, neglecting, or exploiting a child or vulnerable adult or if you give me information about someone else who is doing this, I must notify Child Protective Services or Adult Protective Services.
 - If I believe you are in imminent danger of harming yourself, I may call the police, if all other options are exhausted. If a medical emergency requires me to disclose information.
 - o If you enter into litigation with The House of Gladness, LLC.

Your Responsibilities as a Client/Parent/Legal Guardian:

- You are responsible for actively participating in our agreed upon services and making a
 commitment to your success, which includes honestly addressing and sharing your
 thoughts and feelings, even if it is uncomfortable or difficult, following through with
 homework, actively participating in the development of your goals, making sure your
 goals are understood, and being on time for your sessions.
- You are responsible for keeping predetermined appointments and giving The House of Gladness, LLC at least twenty- four (24) hours notice of any cancellations or rescheduling needs. (PLEASE NOTE- the cancellation fee does not apply to CMS/Sunshine Health clients. In the event of cancellation or rescheduling needs, the therapist may offer a make-up session if 24-hours notice is given AND if therapist has availability.
- If you have selected the private pay option: you, not your insurance company or any other person or company, are responsible for paying the fees we agree upon.
- If you have selected the FES-UA/Gardiner option: You are responsible for approving all reimbursement requests within 7 days of submission.
- You are responsible for knowing how to contact me or other resources in case of any emergency.
- You are responsible for maintaining confidentiality pertaining to group therapy, when applicable.
- You are responsible for informing The House of Gladness, LLC of any address or phone number changes that arise.