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PATIENT FINANCIAL RESPONSIBILITY

Worker's Compensation

No financial responsibility.

Private Insurance

Co-payments and co-insurance are due at the time of each visit. The co-insurance amount quoted is only an estimate and is based on a percentage of the allowable billed charges which may vary from treatment to treatment depending on what procedures are performed during each visit. Any excess payment will be refunded to the patient after treatment is completed. If any balance remains after treatment is completed, the patient will be billed for the remaining balance.

Co-payment: \$ _____ per visit.

Co-insurance: \$ _____ %, estimated at \$ _____ per visit.

Deductible: \$ _____, of which \$ _____ has been met.

Visits allowed: _____, of which _____ have been used.

Medicare

Effective January 1st, 2009, Medicare is instituting a cap of \$1,860 for physical and speech therapy. Occupational therapy has a separate cap of \$1,860. The new Medicare deductible is \$155 with the co-insurance amount being 20%. This means after either the patient (or when applicable their secondary insurance) meet the deductible, Medicare will pay 80% of allowable charges. If the patient has a secondary insurance, then that insurance will be billed for the remaining 20%. If there is still a balance left over after all insurances have been filled, then the patient will be responsible to pay the remaining balance.

Cash Pay

Cash pay payments are due at the time of each visit.

Initial Evaluation: \$150.00

60 minute follow-up visits: \$125.00

30 minute follow-up visits: \$75.00

Patient/Guardian: _____ Date: _____