

Thank you for choosing PT Plus Physical Therapy!

We are committed to your experience here being successful. You have a financial responsibility that obligates you to ensure full payment of your bill. Therefore, all patients will be required to establish an arrangement for payment of their account. All patients must complete and sign the entire patient registration packet before they see the physical/occupational therapist. By accepting treatment at our facility, you agree to the financial policy as outlined below.

REVIEW YOUR "SCHEDULE OF BENEFITS"

We urge you to review your insurance policy's "Schedule of Benefits." It will help you understand the agreement you have with your insurance company. You should call your insurance provider with any specific questions about your policy relating to outpatient physical/occupational therapy benefits. You need to accurately verify and understand your policy's deductible, co-payment, coinsurance, visit limitations, effective annual calendar renewal date, and any pre-authorization requirements. As a courtesy, we will also verify your coverage, but we will not guarantee the accuracy of the information we receive. Your insurance policy is a contract between you and your insurance provider. You are responsible to know your level of coverage, and you are ultimately responsible for the full payment of your bill.

INSURANCE INFORMATION

We need complete and accurate information about your policy. We will submit claims to your health insurance company for you. You are responsible for payment of any deductible, co-pay and coinsurance as determined by your contract with your insurance company. You are responsible for any amount or any services not covered by your insurer.

CHANGES IN COVERAGE

It is your responsibility to inform us of any and all changes of insurance coverages during the course of treatment. Failure to do so may result in denial of coverage by your insurance company.

IN-NETWORK

You are responsible for meeting the in-network deductible before your insurance will begin to reimburse for the services rendered. You are responsible for co-payments and/or coinsurance as specified in your "Schedule of Benefits." PT Plus has agreed with your insurance company to accept the Preferred Provider maximum allowable charges as full payment for the services rendered. There will be no balance billing for covered services. You are responsible to pay for any services that are received but not covered under your policy. Co-pays or deductibles are due at the time of service.

OUT-OF-NETWORK

You are responsible for meeting the out-of-network- deductible before your insurance will begin to reimburse for the services rendered. You are responsible for co-payments and coinsurance. You are also responsible for the difference between billed charges and your insurance company's maximum allowable charges. Your out-of-network benefits for outpatient physical/occupational therapy will be clearly explained in your insurance policy's "Schedule of Benefits." We will submit claims for payment to your insurance company.

NON-INSURANCE-FEE-FOR-SERVICE

Fee-for-service is exclusively a non-insurance financial arrangement. The Fee-for-service agreement is exclusively separate from the in-Network and Out-of-Network scenarios. Fee-for-service receipts cannot be submitted to insurance for reimbursement. PT Plus will discount our standard fee schedule for this arrangement. To be eligible for this discount, full payment must be received for the services rendered at the time of service.

WORKER'S COMPENSATION

If you are claiming worker's compensation you must provide us with a copy of your personal insurance card and claim information regarding your case. We will confirm your authorization with your case adjuster or case manager. In the event payment for your claim is denied by your worker's compensation carrier, we will file the claims with your personal insurance policy. If your claim is denied by your personal insurance, you are responsible for the full payment of your bill.

MEDICARE

PT Plus is a Medicare-approved provider of outpatient physical/occupational therapy. All Medicare policy holders need to have a physician's referral, prescription or verbal order prior to starting as a physical/occupational therapy patient at PT Plus. Your initial physical/occupational therapy plan of care must be certified by your physician, and depending on the length of your treatment, the plan of care may need to be re-certified periodically by your physician. It is our responsibility to be sure that the plan of care is certified, and this may require you to follow-up with your physician more frequently.