

Lifestyles Physical Therapy Financial and Privacy Policy

We are committed to providing you with the best possible medical care. Please carefully read the following policy and sign and date the bottom if in agreement.

Payment for services is due at the time services are rendered or upon receipt of a patient billing statement. The entire balance on your billing statement is due 30 days from the statement date. If no payment is received within 60 days of the statement date we reserve the right to start the collection process. In order to expedite the payment we accept cash, personal checks, and accept MasterCard, Visa, or Discover cards.

- **Insurance:** If you have medical insurance we will try to help you receive your maximum allowable benefits. Any questions regarding your policy, including deductibles and co-pay, should be referred to your insurance company. For many of you your insurance is a contract between you and your employer or an insurance company. We are not a party to that contract. For some of you we are under contract with your employer or insurance company. For those patients whose plans list or accept Lifestyles Physical Therapy as a contract provider, we will submit the appropriate claim to your carrier. After our office has received payment from your insurance company and all appropriate adjustments have been made, your remaining balance will be billed to you. This bill is due upon its receipt. Be advised our services may be out of network for your policy, which could result in you having to meet an additional deductible or have a higher out-of-pocket rate. Billing your insurance is a courtesy provided by Lifestyles Physical Therapy. If your insurance does not pay for your medical care you are ultimately responsible for payment.
- **Workman's Comp:** Lifestyles Physical Therapy will submit the appropriate claim to your carrier. If your claim is denied you will be responsible for the entire balance. Your bill is then due and payable upon receipt.
- **Auto Claims:** Lifestyles Physical Therapy will submit the appropriate claim to your carrier. If your claim is denied you will be responsible for the entire balance. If your PIP runs out or your claim goes to litigation you will be responsible for the balance. We reserve the right to not carry the balance until your settlement, as we are not a party to your claim.
- **Returned Checks:** There is a \$25 fee for all returned checks.
- **Payment Plans:** If you believe you will need a payment plan, arrangements will need to be approved by Lifestyles Physical Therapy prior to your balance exceeding \$100 and are subject to approval. In the event that payment is missed, or for any other reason, Lifestyles Physical Therapy reserves the right to cancel the payment plan and request full payment of the outstanding bill.
- **Protection of Patient Information:** Please understand your patient information is held in confidence and that no information will be given out without your direct consent. By signing this form it gives us permission to use your information solely for the purpose of collection of your claims. If information is requested by anyone or company other than your insurance company or you, you will need to provide us with a release of information approval form. Copies of this policy are posted in the clinic and are also available for your records.
- **24-Hour Cancellation/No-Show Policy:** Lifestyles Physical Therapy requires a 24-hour notice for any canceled appointments. In the event of a no-show or cancellation without at least a 24-hour notice, a \$35 fee will be charged to the patient for a ½ hour appointment. For a 1 hour appointment, this fee increases to \$65 for a no-show or cancellation without at least a 24-hour notice. We reserve the right to discharge any patient who does not show up for an appointment or repeatedly shows up late.
- **Point-of-Service Rate:** For the 2015 year Lifestyles Physical Therapy has a Point-of-Service (out-of-pocket) rate of \$35 per first unit (a unit equals 15 minutes). For all appointments longer than 15 minutes the per-unit rate will be \$32.50. For most patients that are paying on a POS basis this means that a typical ½ hour appointment will cost \$65.
- **Collections:** Lifestyles Physical Therapy reserves the right to forward your account onto collections for lack of payment at any time. If your account is forwarded to our collections service, Transworld Systems, all payments made on your account must be made through them. If you have received any courtesy write-offs on your account leading up the collection process, Lifestyles Physical Therapy reserves the right to remove these courtesy write-offs prior to the final balance being submitted to the collection service. If your account is forwarded to collections you will be discharged and you will not qualify for future treatment.
- **Discharge:** Lifestyles Physical Therapy reserves the right to discharge a patient at any time for any reason. In the event that you are discharged we will do our best to make your chart notes and treatment plan available as soon as possible.

Thank you for using Lifestyles Physical Therapy for your care!

I have read and understand this financial and privacy policy.

Signature: _____ Date: ____/____/____