

## **Practice & Financial Policy**

Thank you for choosing **Therapy Direct** as your Physical Therapy provider. We are committed to providing the best possible care for you. In order to achieve this goal, we need your assistance in understanding our practice and financial policy. Please understand that payment of your bill is considered part of your treatment. The following is a statement of our Practice & Financial Policy. **Payment of services is due prior or upon completion of each treatment visit. We accept cash, MasterCard, Visa, Discover and personal checks. Once your insurance information is on file, we will submit your claim to your insurance company and follow the guidelines on your policy including copays and coinsurances.** 

#### **Authorization & Agreement of Payment**

I hereby assign all benefits directly to **Therapy Direct** and also authorize release of any medical records necessary to facilitate my treatment to process medical claims and as otherwise permitted or required in the Notice of Privacy Practices. I understand fully that in the event my insurance company or financially responsible part does not pay for the services I receive, I will be financially responsible for the payment. I understand that my **Therapy Direct** bill is payable within 30 days of discharge. Any amount not paid within 60 days of invoice shall accrue a late fee of 5% of the total amount due. If the indebtedness is placed for collection, I the patient will pay all reasonable attorney's fees and collection costs.

We will be glad to answer any questions you may have about your insurance. You must realize, however, that your insurance is a contract between you, your employer and your insurance company. We are not party to that contract. We must emphasize to our patients, all charges are your responsibility from the date of services rendered. It is our policy to call and verify benefits and eligibility to estimate your payment portion. However, there is no guarantee from the insurance company of their payment amount. We may not know the exact amount due until the claim has been processed. At this point, there may be more due on your account. In this event, we will mail you a statement and appreciate prompt payment. We will take the contracted rate assigned by the insurance company and make proper adjustments to your claim. *All deductibles and/or copays are due at the time services are rendered, as this is a requirement by your insurance company.* 

#### **Medicare Insurance**

I request that payment of authorized Medicare benefits be made on my behalf to **Therapy Direct** for services provided by Therapy Direct. I authorize any holder of medical information about me to be released to the Health Care Financing Administration and its agents all information needed to determine these benefits or the release of medical information necessary to pay the claim. If other health insurance is indicated in item 9 of the HCFA 1500 or elsewhere on other approved claim forms, my signature authorizes releasing the information to the insurer or agency shown. Therapy Direct accepts the charge determination of the Medicare carrier as the full charge, and I am responsible only for the deductible, co-insurances and NON- COVERED services. Co-insurances and deductible are based upon the charge determination of the Medicare carrier.

### **NON- Covered Expenses**

Therapy Direct is committed to providing the best treatment for our patients and we charge what is usual and customary for our area. You will be responsible for payments and charges denied due to the insurance company's arbitrary determination of usual and customary rates. There may also be charges that your insurance does not cover due to limitations of your policy, or what they consider reasonable and necessary. It is your responsibility to know what your policy limitations are. Therefore, unless you alert us prior to treatment, you will be financially responsible for non-covered expenses, such as electrodes, dry needling, taping, or any other services under your Plan of Care, that your therapist may determine beneficial for you.

# **Missed and No Show Appointments**

We ask that you please be on time for your appointment so that you may be given the full benefit of your scheduled treatment. Late arrival of greater than 10 minutes may result in a shortened treatment or no treatment at all. We understand that emergencies happen and they are uncontrollable but, if you see that you are going to not be able to come please try and give us a call as soon as possible. You are subject to a no show charge of \$35.00. Attending your scheduled appointment is crucial to a successful treatment and recovery for your injury.

### Treatment of Minors & Liability/Waiver and Release

I, as parent/guardian of the minor receiving treatment at **Therapy Direct**, do hereby agree and understand that I have been advised to remain on the premises during such treatment, unless otherwise advised by the Doctor of Physical Therapy. Should I not be on said premises at the time of the minor's treatment, I waive any claim I may have resulting in failure to do so. I know and agree that **Therapy Direct** is not responsible for loss or damage to personal valuables. I also hereby release discharge and acquit **Therapy Direct**, its agents, representatives, affiliates, employees or assignees of and from any and all liability, claim, demand, damage, cause of action, or loss of any kind arising out of or resulting from refuel to accept, receive or allow emergency and/or medical services, including but not limited to ambulance service, Emergency Medical Technician, physician or urgent care services.

### **Photography Waiver and Release**

I hereby grant Therapy Direct and its legal representatives the right and unrestricted permission to use and publish photographs or video images of me (or which I may be included) for any purpose, included but not limited: website/internet use, editorial publications, catalog and advertising use.

Dry Needling: Dry needling is a technique used in physical therapy practice to treat trigger points in muscles. You should understand that this dry needling technique should not be confused with a complete acupuncture treatment. A complete acupuncture treatment might yield a holistic benefit not available through a limited dry needling treatment. Dry needling has both potential benefits and risks. Potential risks include: pain from needle insertion, stuck needle, fainting, needle being forgotten, broken needle, muscle soreness, bruising, infection, fatigue, pneumothorax or nerve injury. Potential benefits include: Decrease in pain, improved movement patterns, relaxation, and decrease in trigger points with the goal of treatment to assume a higher functional level of participation in an enhanced quality of life. At Therapy Direct, only a Dry Needling Certified (Cert. DN) Doctor of Physical Therapy (DPT) will complete dry needling techniques.