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**2023 PATIENT FINANCIAL RESPONSIBILITY**

**Worker’s Compensation**

No financial responsibility if your injury claim has been accepted. If your workers’ compensation claim is denied

as a non-industrial injury, or you sign a settlement agreement to release responsibility from your

employer/insurance carrier, you will be liable for charges after that.

**Private Insurance**

All estimated patient responsibility will be due at the time of your visit. The 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 you owe additional amounts, you will receive a bill for the remainder owed. If your

deductible has not been met for the year and we are in network with your insurance, we will collect $150.00 for

your initial evaluation and $75.00 for your follow up appointments. For out of network patients, we will collect

$180.00 for the initial evaluation and $90.00 for follow up appointments.

Co-payment: $\_\_\_\_\_\_\_\_\_\_per visit.

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

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

Visits allowed:\_\_\_\_\_\_\_\_\_\_, of which \_\_\_\_\_\_\_\_\_\_ have been used.

**Medicare**

The 2023 Medicare deductible is $226 with the co-insurance amount being 20%. This means after either the patient or 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 claims have been filed, then the patient will be responsible to pay the remaining balance. We advise that you check with your secondary insurance to see if your plan covers the Medicare Part B deductible. If not, you will be responsible for covering the $226 deductible for 2023.

If your secondary insurance plan is an HMO, they will not cover your visits with Physical Edge. You will be responsible for covering the Medicare deductible and the 20% Medicare coinsurance.

If you have not met your Medicare deductible for the year and your secondary plan does not cover the deductible, we will collect an estimated $180.00 for the initial evaluation and $46.00 for your second visit to cover your Medicare deductible of $226.00

If you do not have a secondary insurance, or your secondary insurance is an HMO plan, we will collect the following amounts as an estimate towards your coinsurance responsibility: $30.00 for initial evaluations, $15.00 for follow up visits.

Medicare only covers Physical Therapy that is medically necessary. If you wish to receive non-medically necessary services (Wellness/Personal Training), you will be responsible at the self pay rates.

**Self Pay**

Self Pay payments are due at the time of each visit.

Initial Evaluation: $180.00 Mat Moore Initial Evaluation: $225.00

Follow-up visits: $90.00

Mat Moore Follow-up Visits: $125.00

Patient/Guardian:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Guardian:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relation to Patient:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_