

# McDONALD PHYSICAL THERAPY

*Aggressive, Innovative Treatment*

## CLINIC POLICIES

Our policy regarding payment is that all patients pay for physical therapy at the time service is rendered (**excluding workman's compensation claimants**). You may pay with cash, check, debit, Visa, MasterCard, American Express, or Discover.

INITIAL VISIT – At your first visit we will collect what you normally pay as a copay at your physician's office. After this first visit, if you have insurance, and your deductible has been met for the year, we ask that you pay your co-insurance (20 percent, on average) at each visit.

INSURANCE – As a courtesy, we file your insurance claims for you. Unfortunately, there are occasions when the insurance company will reject the claims. If this occurs, you will be asked to contact your insurance company to determine the reason for their rejections or pending of claims. It has been our experience that insurance companies will respond more promptly to you, the insured, than to us, the provider. Thank you in advance for your assistance. **PATIENTS SHOULD NOT FILE THEIR OWN MEDICARE CLAIMS.**

LEGAL CASES – We cannot treat patients on a contingency basis; therefore, when legal cases are pending settlement, we ask that each visit be paid at the time of service. In the event that we have to turn your account over to an attorney, who is not our salaried employee, for collection, you agree to pay all costs of collection including reasonable attorney fees. **IF PAYMENT IS NOT RECEIVED WITHIN 60 DAYS, OR THE BALANCE OF THE ACCOUNT IS OVER \$500, YOU WILL BE RESPONSIBLE FOR PAYMENT OF THE BALANCE AT THAT TIME.**

RETURNED CHECKS - Checks returned by the bank for insufficient funds will be subject to a \$25.00 service fee.

APPOINTMENTS AND CANCELLATIONS – We will call to remind you the day before every appointment. If you do not want to receive reminder calls, please check the box on the bottom of the first page.

FOR LIABILITY REASONS CHILDREN ARE NOT ALLOWED IN THE WORKOUT AREA OR ON WORKOUT EQUIPMENT. If children are with you during treatment, they must remain in the treatment area. (The presence of children may affect your focus on your treatment.)

We reserve the right to reschedule a patient who is 15 or more minutes late for an appointment.

A 24 hour notice is required to cancel your appointment. After hours, or on the weekend, a message may be left with our answering service. **THERE IS A \$25 CHARGE FOR A CANCELLATION WITHOUT A 24 HOUR NOTICE.** This charge is not covered by Workman's Compensation or by insurance companies. It will be the responsibility of the patient to pay this charge. Please avoid the inconvenience and give us the courtesy of a phone call at least 24 hours in advance.

If two or more appointments are missed at any time during a patient's rehabilitation, any further appointments you may have already scheduled may be taken off the schedule. The patient will then be required to schedule their appointment each day they plan on attending therapy, provided an opening is available. In addition, your doctor, insurance company and/or work place will be notified.

Thank you for giving us the opportunity to serve you, and please feel free to ask us any questions concerning our services, policies and fees.

The undersigned accepts all responsibility for treatment costs not covered by third party payers (**this does not apply to workman's compensation claimants**).

Signature \_\_\_\_\_ Date \_\_\_\_\_