

TRANSITIONS THERAPIES WEST

Aquatic and Physical Therapy



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To all of our Medicare patients:

Please take a moment to read this information and sign below. Thank you.

- The Medicare deductible for 2018 is \$183. Your secondary insurance may cover all or part of your deductible. If not, or if you don't have secondary insurance, your deductible will be due within 10 days of your first date of service in 2017.
- The Therapy Cap is \$2,010. You may qualify to get an exception to the therapy cap limits so that Medicare will continue to pay its share for your therapy services after you reach the therapy cap limits. If you qualify, your therapist will document your need for medically reasonable and necessary services in your medical record and we will indicate the same on your Medicare claim.
- The Medicare Threshold is \$3,000 for Speech and Physical Therapy including hospital care. Once we cross the Medicare Threshold, Medicare will ask for a copy of your records and may or may not accept your treatments over \$3,000 as medically necessary. If they decide it was not medically necessary, you or your secondary insurance would be financially responsible. If you had previous physical therapy treatments you may be asked to sign an **ABN**, advance beneficiary notice, which will guarantee patient payment if you exceed the threshold.
- If you do not have secondary insurance coverage, and are not covered by Medi-Cal, you are responsible for paying the deductible and the 20% Medicare co-insurance. Payment in full is expected 10 days after billing. You may arrange to pay as you go to avoid a large bill later on.
- We are not contracted with Medi-Cal. If you are covered by Medi-Cal, you will not be responsible for any co-insurance EXCEPT for any portion of the Medicare deductible (up to \$183 per calendar year) that we are instructed to collect. The deductible must be collected from you and must be paid within 10 days of the bill.
- We will bill your secondary insurance as a courtesy to you. However, you are expected to know your secondary benefits and limitations. Some plans are not designed to be supplemental to Medicare. They may have a strict limit on visits, dollar amounts, or may not cover if Medicare pays more than they would if they were the primary insurance.
- Medicare will **not** pay for Physical Therapy and Speech Therapy treatments on the same day.
- **IMPORTANT!** If you are having or should you need Home Health Care, Medicare will **not** pay for you to have Physical Therapy treatment unless you have been officially discharged from Home Health Care. Home Health Care will give you a signed document stating your date of discharge. Please note that **if you do have** Physical Therapy treatment while receiving Home Health Care, **even if it is for a different ailment**, you will be responsible for the FULL amount of the charges.
- If you do not show up for your scheduled appointment or cancel an appointment less than 24 hours from the appointment time, you will be required to pay a \$50 fee. This cannot be billed to your insurance and must be paid in full prior to your next visit.

I understand and agree to the terms of payment above.

Patient's Signature _____ Date _____

Patient's Name _____
(Please print)