

**PRESSLER
PHYSICAL THERAPY CLINIC
402 West Wheatland Road, Suite 100
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Thank you for choosing us as your healthcare provider. We are committed to providing the best physical therapy treatment we can and payment of your bill is part of the treatment. The following is our financial policy and we require you read and sign prior to treatment.

FINANCIAL POLICY

1. If you do not have insurance, have not met your deductible or have copays, full payment is due at each visit. We accept cash, credit and debit cards, and checks.
2. We will file your insurance and/or Medicare. Your insurance is a contract between you and your company and we are not a party to that contract. If the insurance company has not made payment or notified us of a reason within 45 days you will be billed and responsible for the bill.
3. We charge usual and customary fees for our care and you are responsible for payment regardless what your insurance company calls usual and customary.
4. The adult accompanying a minor or the parent/guardian of the minor is responsible for the parent portion of billing. Parent or guardian must sign consent to treat a minor.
5. **APPOINTMENTS MUST BE CANCELLED AT LEAST 24 HOURS IN ADVANCE IN ORDER TO AVOID OUR \$25 MISSED APPOINTMENT FEE. HELP US SERVE YOU AND OUR OTHER PATIENTS BY KEEPING YOUR SCHEDULE. YOU CAN CALL AND LEAVE A MESSAGE ON THE RECORDER IF NEEDED. IT IS AVAILABLE 24 HOURS A DAY.**
6. If your account is referred to collections, you will be responsible for the % paid to the collection agency in addition to the whole balance due.
7. There is a \$25.00 service charge on all returned checks.
8. It is your responsibility to inform our clinic of your insurance coverage change.
9. Medicare claims will be submitted in addition to claims to your secondary insurance. If you do not have secondary insurance, you are responsible for the 20% not covered by Medicare. The 20% is due at each visit. Medicare may or may not cover treatment charges.
10. Medicare has a limit of \$2,080.00 allowed for expenses of outpatient physical therapy and speech therapy together per year. There is a \$198.00 deductible on Medicare Part B. We will inform you when you are close to the limit according to our records. Please indicate to the office staff if you have had Physical Therapy or Speech Therapy this year, if your Medicare Part B deductible has been met, or if you have had any Home Healthcare in the past year.

Patient

Parent/Guardian

Date