

2819 Great Northern Loop, Suite #300 Missoula, MT 59808 406-317-1121 (Office) 406-317-1875 (Fax) www.greatdividept.com

FEE FOR SERVICE OPTION

ABOUT

Great Divide Physical Therapy (GDPT) offers private payment for therapy to patients. This is a great option for individuals with a high deductible insurance policy, no insurance, or that prefer to not bill their insurance. With this option, a physician's prescription is not necessary. This option allows you to make all the decisions regarding your health and treatment options. The costs are less than typical private insurance billing and we offer the savings to you.

COSTS

Initial Evaluation appointment: \$120

Additional appointments: 40 minute - \$90, 60 minute - \$120

Individual modality treatment: \$30

PAYMENT

Payment for your visit is required at the time of service. We accept cash, check, and credit cards for payment. Our services also qualify for flex plans.

INSURANCE

GDPT will not bill your insurance for these services, therefore reducing costs and allowing an individual to save on their therapy needs. GDPT does provide an itemized receipt. The clinic is not involved in the insurance billing process. If you choose this option for your treatment, you will be required to sign the waiver below stating GDPT will not be involved in the insurance billing process.

HEALTH SAVINGS ACCOUNTS

Health Savings Accounts (HSA's) are an option for high deductible policies that are available to pay for physical therapy. Currently, many health insurance policies have associated HSA's tied into the policy itself. For these policies, it is illegal for us to accept the HSA payment for the cash pay rate. It is a breach of the contract that allows us to be in-network with the insurance company. To avoid potential problems of being able to accurately assess each individual's insurance policy, and the growing complexity of the insurance industry, it is GDPT policy that we cannot accept HSA payment for cash pay services. GDPT is sorry for this inconvenience.

SUPPLIES

GDPT provides some exercise aids to patients free of charge such as Therabands and tape. Other specialized supplies and equipment must be purchased when you receive them at an additional cost.

LATE CANCELLATION

If you must cancel an appointment, please call us by 6:00 pm of the previous business day to avoid a \$15.00 "Late Cancellation" fee.

WAIVER OF GDPT INSURANCE BILLING I understand that by accepting the Fee For Service option for my treatment, GDPT will not be involved in billing my

| insurance company. | | |
|--------------------------------|-------|--|
| Patient Name (Please Print): | | |
| Patient / Guardian Signature: | Date: | |
| CDDT Panracentative Signature: | Date: | |

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