

## FINANCIAL POLICY

**Insurance claims are filed on a weekly basis as a courtesy to our patients.**

- Private Pay: If you have no insurance coverage, payment in full is due at time of service. Our policy is aimed at treatment, so we have reduced our fees to patients without insurance. Treatments under 30 minutes will be billed at \$50.00 and treatments over 30 minutes will be billed at \$75.00. Payment options include cash and checks.
- Managed Care: Co-payment amounts are due at the time of service. This requirement is part of your agreement with your insurance company. If your insurance plan requires prior authorization, our office will obtain it prior to your appointment. You are responsible for the balance of your account after 45 days.
- Commercial: Coinsurance and deductible amounts are due at the time of service. You are responsible for the balance of your account after 45 days.
- Medicare: Our office will bill all covered services directly to Medicare. If you have Medigap (secondary or supplemental) coverage, it will also be billed for you. You are responsible for coinsurance and deductibles.
- Medicaid: All covered services will be billed by our office directly to MEDICAID. If payment denies for reasons of expired eligibility, payment in full will be due immediately. A current MEDICAID Card and appropriate prior authorization from your primary care physician are due at your appointment time.
- Worker's Comp: Verification of your work-related injury will be obtained prior to your appointment. Claims are filed directly with your employer's insurance carrier.
- Litigated: If an attorney is handling your injury claim, payment in full is due at the time of service. Payment options include cash and checks.

**Your signature below authorizes Allen Therapies Inc., to process any manual, over the phone or written credit card transaction for payment of services rendered.**

\_\_\_\_\_  
Signature of Patient or Guardian

\_\_\_\_\_  
Date

\_\_\_\_\_  
Allen Therapies Inc Representative

\_\_\_\_\_  
Date