

Common Insurance Terms

Benefit Period - The number of days that your benefits are calculated for a calendar year.

Co-insurance - Your share of the costs of your health care service, calculated as a percent of the allowed amount for physical therapy. The patient is responsible to pay the co-insurance balance once SHPT receives a benefit statement. For example, if your co-insurance is 20% and you have met your deductible, if your health insurance plan's allowed amount for an office visit is \$100, then you would be responsible for \$20.

Co-payment - A predetermined, flat fee that you are responsible to pay at each visit. We accept cash, check, MasterCard, Visa, and Discover. You will be expected to pay your co-pay at the time of service, or you may choose to pay in advance.

Deductible – The amount you are responsible for paying annually before your insurance can be applied. Somerset Hills PT will not be compensated by your insurance company for any of your physical therapy treatments, until your deductible has been met. You will be expected to pay your deductible, if one exists, once Somerset Hills PT receives a benefits statement. Physical therapy treatment sessions may be approximately \$70-\$120 each.

Exclusions - Items or conditions that are not covered by a general insurance contract. Pulleys, theraband, orthotics, electrodes, and ice packs are some examples of supplies that are not covered by insurance.

Explanation of Benefits (EOB)- You will receive a statement sent by your health insurance company explaining what medical treatment and/or services were paid for on your behalf.

You will be expected to keep current with your account. The amount due will be noted as “patient responsibilities” on your EOB. Once our billing department receives your EOB, Somerset Hills PT will update your billing statement and send it by mail, or present it to you when you sign in for your treatment session.

*Somerset Hills Physical Therapy, PC is aware that rising health care costs, higher deductibles and co-payments increase your financial responsibility. We are willing to work with you to manage your account. Please let us know if you need to set up a payment program.