

SOMERSET HILLS PHYSICAL THERAPY, PC
INSURANCE, PAYMENT, AND CANCELLATION POLICIES

Welcome to Somerset Hills Physical Therapy! We are committed to serving you by offering the highest quality of physical therapy care. To avoid any confusion, we would like you review our policies on payment, insurance verification and cancellations.

PAYMENT FORM: We accept checks, cash, Visa/Mastercard and Discover.

INSURANCE COVERAGE: We will contact your insurance company prior to your first visit to verify coverage. This does not guarantee payment. SHPT encourages you to call your insurance provider for benefit verification. Since the relationship with your insurance company is with you, the policyholder, final payment is your responsibility. Please notify us of any changes in your policy.

IN NETWORK: We participate with many insurance policies and will verify your benefits prior to the initial visit. You may be responsible for obtaining a referral from your Doctor. Co-Payments are expected on the date of service. Deductibles and Co-Insurance are expected to be paid once your insurance has released information in the form of an EOB/EFT. We will submit bills directly to both primary and secondary insurance companies.

OUT OF NETWORK: If you are in a managed care network that we do not participate with, you may be required to pay for services up front. You will be provided with a statement which contains all of the information your insurance company will need to process your claim. We will be happy to call your insurance company to obtain out of network benefits and will assist you in submitting your statements to your insurance company.

AUTO- NO FAULT: New Jersey Insurance Law mandates that all auto insurance policies contain a deductible of at least \$250. You may have elected to take a higher deductible. Your private insurance company may pay 80% of the amount on medical bills that fall between the deductible and \$5000 max. You are responsible to pay any deductible and/or co-payment.

WORKERS COMPENSATION: Pre-authorization is needed before your initial evaluation with us. We will need your Claim Number and Case Manager to obtain this authorization. We will bill worker's compensation directly.

LATE PAYMENT POLICY: Any bills which remain outstanding after 30 days, will be subject to a 1.5% per month finance charge.

CANCELLATION POLICY: It is expected that you will provide us with 24 hours notice if you are unable to keep your scheduled appointment. You can leave a message at (908) 766-1407 or reach us through email frontdesk@somersethillspt.com A \$35.00 fee will be charged for cancellations with less than 24 hours notice.