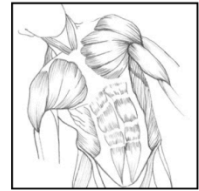


**M O V E M E N T  
S Y S T E M S**  
Physical Therapy, P.S.  
(206) 405-1864 (206) 405-4376 fax



## MEDICARE PAYMENT POLICY

Welcome to Movement Systems Physical Therapy, P.S. In order to budget for your physical therapy services, we would like to provide you with a brief explanation of our Medicare payment policy.

Since we are a non-participating provider with Medicare, we ask that our Medicare patients pay in full at the time of service. You will only be charged 115% of the Medicare allowable per Medicare guidelines. Medicare will directly reimburse you the Medicare allowable portion, less your 20% co-payment.

At this time, MSPT does not bill your Medicare Supplemental (Medigap) Insurance. Contact the Center for Medicare Services for more information regarding reimbursement from your Medigap plan. <http://www.cms.gov/home/medicare.asp>

Remember, for Medicare to pay for your treatments, you must meet the following criteria:

1. Your current treatment plan **must have nothing to do with an automobile accident claim, legal case or be covered by your employer's medical policy.**
2. If you schedule therapy without a physician's prescription/referral, we MUST obtain a signed physical therapy plan of care from your physician within 30 days of your initial visit.
3. **You MUST be discharged from any home health care services** or agency prior to initiating outpatient physical therapy. Medicare will not pay for both home health and outpatient care simultaneously.
4. The benefits in the Medicare Part B program changes each year. Each year they specify a dollar limit cap for outpatient physical therapy in all settings outside of a hospital rehab department. The means that your physical therapy visits will be limited by medical necessity or approximately 16 visits at MSPT. If your condition requires care beyond that, we can continue to treat you utilizing the Medicare exception rules, however it is important to know that they may deny these extended visits. The cap for the current year **2011** is **\$1870.00**

If you have any questions regarding this policy Please feel free to contact our Financial Coordinator at (206) 405-1864 ext. 105 or via email at [info@movementsystemspt.com](mailto:info@movementsystemspt.com) .

By signing this document you indicate that you have read and understand our Medicare payment policy.

Signature \_\_\_\_\_ Date \_\_\_\_\_