



Balanced Body Physical Therapy (BBPT) Financial Policy

Insurance Information-

We accept most insurance plans; however, it is advised that you contact your insurance company to verify the coverage of physical therapy services INCLUDING any preauthorization or authorizations needed as well as any copays, coinsurance, or deductibles or visit limitations. We do contact your insurance company to check your benefits as a courtesy to you, but the information given is not always accurate.

Payment-

All payments for private pay, balance due on accounts, copayments, coinsurance, and deductible payments are due at the time of service. For larger balances, we do offer a payment plan if necessary. Contact the front office for details.

Private Pay-

Our prices for private pay patients are \$150.00 for evaluation visit and \$90.00 for follow-up visits.

If you have a Copayment-

Your copayment is due at the time of service.

If you have a Coinsurance-

Your coinsurance will be due at the time of service once it is determined by your insurance company, and we have received an EOB (Explanation of Benefits) stating that amount.

If you have a Deductible-

Your insurance company will send you an EOB (Explanation of Benefits) informing you of your deductible amount that is remaining. It is your responsibility to keep informed of the status of your deductible and in so doing, you will inform our office that it has been met. This will alleviate any questions regarding your copayment/coinsurance responsibilities.

Balances Due-

You will be responsible for paying any balances when you check in for your appointment. The front desk will inform you of any outstanding balances that are on your account.

Collections-

Payment in full is due within sixty (60) days from the date of service. If payment in full is not made as required, then in addition to all other amounts that may be due I agree to pay a collection fee of up to 40% of the principal amount as provided by §12-1-11 of the Utah Code Annotated, and further agree to pay all other costs of collection (whether incurred by BBPT or its assigns) including but not limited to court costs, reasonable attorney fees, and interest (both pre-and post-judgment). Any interest due hereunder shall be calculated at a rate equal to 18% per annum and may, as determined by BBPT or its assigns: (a) accrue on some or all amounts due and (b) compound as frequently as daily--meaning that accruing interest may be added to the balance owing as frequently as daily such that it shall thereafter constitute part of the amount upon which interest accrues during the next accrual period.

Signature of Responsible Party

Date

Witness

Date