



**ORTHOPEDIC
& TMJ
PHYSICAL
THERAPY
CENTER**

- TMJ/Jaw Disorders
- Headaches
- Painful Neck, Back & Extremities
- Coccyx/Tailbone Pain
- Posture/Ergonomics
- Stress management Skills
- Pregnancy Aches/Pains
- Urinary & Fecal Incontinence
- Pelvic Pain
 - Vaginismus
 - Vulvodynia
 - Interstitial Cystitis
 - Painful Intercourse

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PAYMENT AGREEMENT

As a courtesy, we call your insurance to verify benefits prior to your initial evaluation. We do our best to help you solve problems with your insurance such as pre- authorizations and limitations of coverage before you come in.

Often times insurance companies issue disclaimers that they do not guarantee payment because of many variables: eligibility, benefits used, pre-existing conditions/waiting periods, final diagnosis from the physician, waivers, exclusions and limitations of the contract and your deductible. Frequently we are given incomplete or inaccurate information. **We advise you to review your plan's booklet to confirm your coverage.**

On _____, your insurance told us the following: _____

We require that you pay us your co-payment, unpaid deductible, and/or co-insurance due at each physical therapy visit, which is:

Special arrangements: _____

Although you are ultimately responsible for paying all charges, we will bill your insurance carrier for you. If for any reason your insurance carrier has not remitted payment within 60 days, you agree to make monthly payment on the balance. If you miss a monthly payment, you agree to pay a rebilling fee of \$5.00 for each month no payment is made.

If your insurance carrier subsequently pays in excess of the balance on your account, you will be reimbursed the excess amount when you have been discharged from therapy.

Private health insurance companies do not generally pay for supplies and therefore we expect payment for them at the time they are received. As a courtesy, we will bill the insurance company for supplies and reimburse you if the item is paid.

We request 24 hours notice to cancel appointments and reserve the right to charge a fee for broken appointments. Insurance companies do not pay for missed appointments. This fee is your responsibility.

I have read and fully understand my financial responsibility for payment of my account.

Signature Date
