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Dear Patient,

We are happy and honored that you and/or your referring physician have trusted us with your care. We hope that after your first visit you will feel valued and well taken care of. Our highly trained staff members at Action PT strive to do their very best from insurance and benefits verification, to check-in, to the individualized treatment plan developed by your therapist, and finally to discharge of therapy. We hope to make this experience a pleasant one!

There are a few important things you should know and expect prior to receiving therapy. In your new patient packet, you will find your new patient paperwork to hand in prior to your first visit as well as information on some of our policies.

PLEASE READ THE FOLLOWING INFORMATION CAREFULLY

- **Insurance benefits are checked by the Action PT Billing Department only as a courtesy to the patient.** If a patient has a high deductible, co-pay or co-insurance, and cannot pay upfront, the billing department can work with the patient to set up a payment plan. This will help to avoid a large balance at the conclusion of therapy for many treatment dates. All patients are required to sign the section in the general information stating that they understand that they are ultimately responsible for their bill and making all payments owed to the provider (Action PT). In the rare case the insurance denies a claim or multiple claims because information needs to be verified by the patient, the balance will be shifted to the patient until the patient resolves the issue with their insurance. If the patient is unwilling to call the insurance company to give the required information, the patient will be responsible for the entire amount of the bill.
- It is important to understand that **the patient is under contract with their own insurance company.** The amount owed to the provider (Action PT) is 100% determined by the patient's policy. **The amount owed to the provider (Action PT) is never determined by Action PT.** This includes unmet deductibles, co-pays, or co-insurances. It is against the law for a patient not to pay the amount owed to the provider (Action PT) because it is a breach of contract with their insurance company. In addition, Action PT is in contract (in network) with most insurance companies and therefore will write off anything over what is allowable by the contract. In the case the patient needs a service that is not covered by the in-network agreement; Action PT will notify the patient to see if the patient agrees to the service. The billing department will then make arrangements to charge and bill the patient accordingly.
- **Please do not ask the billing department to adjust off any charges, deductibles or co-pays over what is allowed by insurance as it is also against the law for them to do so.** It is VERY important for the patient to take responsibility in knowing their individual benefits and what insurance will allow so unexpected balances do not occur. **The Action PT Billing Department files with MANY insurance's and most offer several different plans, therefore it is the patient who must make sure the benefits checked are what match their plan.** All accounts are assessed daily, and the billing department works with a collection agency to collect anything that the patient owes that they have been unsuccessful in collecting. We appreciate prompt payment for the portion the patient owes to Action PT.



- The **No show/ Cancel Policy** is put in place to keep 3 people from being hurt. 1. The patient who needs treatment. 2. Another patient who could have been scheduled in that spot. 3. The therapist who now has a hole in their schedule. We appreciate your understanding of why this important policy is in place. **We do understand that emergency situations occur and we will handle them appropriately.**
- All cash patients must pay for services when they are rendered unless a payment plan has been set up through the billing department.
- Third Party/Personal Injury/MVA Patients- We are happy to see personal injury or motor vehicle accident patients. It is our policy that all required paper work must be signed and in place prior to the second visit. It will be distributed to the patient upon the initial evaluation. The billing department will need information such as claim number, attorney information, etc. The billing department is happy to work with the patient as much as possible, however it is the responsibility of the patient to make sure this is all gathered prior to the second visit.

The Action PT Billing Department

Now that a few expectations have been reviewed on our end, it is important to know what *YOU* should expect from *US* here at Action PT.

- Your service should always be prompt and friendly! From the time you check in, to sitting in the waiting room, we want it to be as pleasant as possible. Please let the receptionist know if there is anything that needs to be tended to. If you have not been brought back to gym 5 minutes after your scheduled appointment time, please check in again with the person at the front desk. Upon entering the gym and working with the staff, you should be greeted with professionalism, smiles and friendly faces. The staff is here to meet any need they possibly can while you are going through your session.
- Our facilities and tables should always be clean and tidy. Mat tables are cleaned and pillowcases changed between every patient. The patient restrooms are to be clean and stocked.
- The therapists and technicians work together to make sure you are properly taken through your individualized treatment plan. They should always act professionally and show kindness and compassion during your session.
- Your pain level should be monitored during every visit and treatment plan adjusted by your treating therapist accordingly. Please notify your treating therapist if your pain level is increasing more than an expected amount during a session.
- Please let the receptionist know if there is anything that needs attention in any area of our clinic. If you would rather contact Human Resources, please call 405-214-0300 and speak with Billie Gibson. She is more than happy to take care of your needs the best she can.
- Our services should make you happy enough to want to tell others about us!!

We know you have a choice when it comes to therapy and we want thank you for trusting us with your care!!!

When you come into the financial office or even reading your Explanation of Benefits from your insurance company, there are often times three terms that are used that you may not understand. Below we have defined these terms for you in hopes that this will help you better understand some of your coverage.

Coinsurance:

Your share of the costs of a covered health care service, calculated as a percent (for example, 20%) of the allowed amount for the service. You pay coinsurance plus any deductibles you owe. For example, if the health insurance or plan's allowed amount for an office visit is \$100 and you've met your deductible, your coinsurance payment of 20% would be \$20. The health insurance or plan pays the rest of the allowed amount.

Deductible:

The amount you owe for covered health care services before your health insurance or plan begins to pay. For example, if your deductible is \$1,000, your plan won't pay anything until you've met your \$1,000 deductible for covered health care services subject to the deductible. The deductible may not apply to all services.

Copayment:

A fixed amount (for example, \$15) you pay for a covered health care service, usually when you get the service. The amount can vary by the type of covered health care service.