



Patient Name:	
Date of Birth	
SSN:	

## BODY THERAPEUTICS – FINANCIAL POLICY

### Self-Pay

Our self-pay rates for our services can be found in Appendix I on this Financial Policy. Payment is due at the time of service. Body Therapeutics does not bill for self-pay visits. You may pre-pay for self-pay visits by purchasing one of our session packages. Packages never expire. Unused package sessions will not be refunded but can be used as a credit on your account toward other services. If you are a self-pay patient and wish to begin using an insurance plan at any time, you must notify us before your visit so that we may verify your insurance prior to your appointment. Body Therapeutics does not retro-bill insurance companies for visits in the past.

### Health Insurance

Body Therapeutics is happy to bill your health insurance company for your visit on your behalf. Body Therapeutics providers are in contract with many insurance companies. Prior to your visit, Body Therapeutics will contact your insurance company to confirm that you have active coverage and to determine if Body Therapeutics providers are considered “in network” or “out of network” with your plan. If Body Therapeutics is considered out of network, we will inquire whether you have out-of-network benefits. Patients must provide all insurance information during the initial patient registration, including any secondary, tertiary and supplemental plan information, if applicable. If you have more than one insurance, Coordination of Benefits will be determined by your insurance companies. It is the patient’s responsibility to immediately notify Body Therapeutics of any changes to your insurance. Body Therapeutics will not retro-bill an insurance company, and if there are any dates of service that are not covered due to a referral not being in place or a change in insurance that you did not notify us of before-hand, you will be responsible for the self-pay rate for those visits. We will provide you with the documentation necessary to seek reimbursement for self-paid visits.

We will inform you of the benefit information we receive from your insurance company in regard to treatment visit limits, covered diagnoses, referral requirements, pre-authorization requirements and your financial responsibility. This will be explained to you and presented to you as a Good Faith Estimate. That being the case, **it is ultimately your responsibility to understand your benefits and your financial responsibility. We strongly encourage you to verify your own benefits with your insurance company. Body Therapeutics cannot guarantee that your insurance company provided us with correct information. All charges will be processed as determined by your insurance company even if they differ from the benefits information your insurance company provided to Body Therapeutics.**

For patients with a benefit responsibility that involves only a copay, we will be able to tell you how much each visit will cost and the copay due at the time of service. For patients that have a deductible or co-insurance, Body Therapeutics can only give you an estimate of what each visit may cost but cannot provide a definite amount as it will depend on which CPT codes are deemed appropriate at the time of your visit by your provider.

### **We will collect your copay and/or a payment toward your deductible or co-insurance at the time of your visit.**

Please note that it often takes 30 days or more from the date of service for an insurance company to process a claim. After insurance claims have been processed, you will be responsible for and billed for any balances due on approved charges, and/or non-covered services. At any time if your insurance plan decides that these services are not covered, or not medically necessary, and/or they take their payments back, then you will be responsible for payment of all those non-covered dates of service. If your payments made for your visits have exceeded your responsibility as determined by your insurance company, a refund will be processed in a timely manner.

### Motor Vehicle Accident (MVA)

Patients treating as a result of a motor vehicle accident will be processed according to Massachusetts laws or the laws of the state in which the accident occurred. In Massachusetts, providers are to first bill the patient’s vehicle insurance, regardless of who was at fault for the accident. Payment for this will come for the Personal Injury Protection (PIP) portion of the insurance. PIP is limited to \$2,000 or \$8,000 per accident, depending on the policy type. A medical claim, or personal injury case, must be open and on file with your vehicle insurance company prior to your first visit. Once the PIP

has been exhausted, providers must bill the patient's health insurance with a copy of the PIP exhaust letter. Because Body Therapeutics is unable to determine if the PIP has been exhausted prior to billing for your visit, you are required to have active, in-network health insurance with all the required referrals or authorization in place in order to be treated. If the patient does have active insurance, we will collect the self-pay rate for the service at the time of service, and if the PIP has not been exhausted, we will refund the visit.

If you have an attorney involved with your MVA case, you must complete an Authorization for Disclosure of Protected Health Information form allowing us to speak with your attorney. If your attorney files an Assignment of Benefits with your PIP carrier, you are still responsible for payment with standard billing expectations.

**Worker's Compensation**

Patient's treating as a result of an employment injury will require case adjuster approval for the initial evaluation. After the initial evaluation, documentation of the visit will be sent to the insurance company's Utilization Review department to obtain authorization for future visits. The turnaround time for this authorization is typically 5 business days. If treatments are approved, there will be no payment collected at the time of service, unless you opt to receive uncovered services (like cupping or gua sha) and then you would be responsible for paying for those self-pay services at the time of your appointment.

**Attendance Fees**

A credit card is required to remain on file in our secure system to book any appointment. **Any fees assessed for non-compliance with Body Therapeutics' Attendance Policy will be charged to this card on file.** These fees are not reimbursable by insurance companies and are the sole responsibility of the patient.

**Forms of Payments/Returned Checks**

Body Therapeutics accepts cash, check, Mastercard, Visa, American Express and Discover. Any returned/bounced checks will result in a \$25 fee assessed to you and must be paid before your next visit. In that event, future payments may not be made via check.

**Billing Questions**

Body Therapeutics uses an external, third-party biller. Body Therapeutics' office staff do not have access to this off-site billing system and will not be able to answer your billing questions. All billing questions should be directed to our billers at New England Medical Management Group at 508-721-9782. This phone number will also be on your billing statement. Questions regarding how your insurance company processed a claim should be directed to your insurance company's claims department.

**Billing Statements and Terms**

After insurance claims have been processed by all involved insurance plans, a billing statement for any remaining patient responsibility will be mailed or emailed to you. Payment is due upon receipt. If payment is not received in full, unpaid balances will be sent to collections after ninety (90) days.

**Payment Plans**

If you need more time to make payment on your bill, please contact our billing department to inquire about payment plan options. We want to work with you.

**Your Signature**

Your signature acknowledges that you have received and agree to Body Therapeutics' Financial Policy.

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\_\_\_\_\_  
Printed Patient Name

\_\_\_\_\_  
Patient Signature

\_\_\_\_\_  
Date

SELF-PAY RATES



# BODY THERAPEUTICS

## ACUPUNCTURE & CHINESE HERBAL MEDICINE

Initial Acupuncture Consultation & Treatment .....	140
Follow-Up Acupuncture Treatment .....	100
Mini Follow-Up Acupuncture Treatment .....	60
Initial Chinese Herbal Consultation .....	90
Chinese Herbal Re-evaluation .....	60
Cupping-ONLY Session .....	50
Cupping ADD-on .....	20
Moxibustion ADD-on .....	15

## CHIROPRACTIC

Initial Chiropractic Evaluation & Adjustment .....	150
Chiropractic Re-evaluation .....	100
Follow-Up Chiropractic Adjustment .....	50
Electro-Stim .....	15
Intersegmental Traction .....	15
Moist Heat Therapy .....	15

## MASSAGE THERAPY

45 Minute Massage .....	70
70 Minute Massage .....	100
90 Minute Massage .....	125

Printed Patient Name

Patient Signature

Date