Hudson Valley Manual Physical Therapy

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To all Medicare subscribers:

The therapy cap amount up to December 31, 2018 is \$2010. This cap is applicable to services provided to a Medicare beneficiary January 1, 2018 –December 31, 2018. The maximum allowed will equate to approximately 22 sessions. You will need to keep track of the number of sessions. As part of the Deficit Reduction Act (DRA) in 2006, Congress passed legislation implementing the therapy caps but authorizing the Centers for Medicare and Medicaid Services (CMS) to create and employ an exceptions process to permit medically necessary physical therapy, occupational therapy, and speech language pathology services above cap levels as long as services met specified diagnostic and clinical criteria.

I have read the above statements and understand how my physical therapy benefits have been affected by the reinstated cap.

Patient Signature:	Date:
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- 1. You agree that this office may submit your Medicare claim electronically.
- 2. We are willing to bill your secondary insurance provided we are given the proper information. If we do not participate with your secondary insurance you will be responsible for 20% of what Medicare allows per- treatment.
- 3. You will not be billed until we receive an explanation of benefits from Medicare and your secondary insurance. We will send copies along with your bill.

I have read the above statements and understand them completely. I request that payment of authorized Medicare benefits may be either to me or on my behalf to Hudson Valley Manual Physical therapy and or Elizabeth Weiss, for services provided to me by HVMPT. I authorize and its agents. Any information needed to determine these benefits or the benefits payable for related services.

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Patient Signature:	Date	3.