



Attendance Policy

Consistent attendance is important to getting the most benefit from your therapy.

Late Arrivals: Rehab Concepts reserves the right to reschedule or shorten your session if you arrive more than 10 minutes after your appointment time. If you are not seen because of lateness, your appointment will be considered a "late cancel". (see below)

Cancels/Late Cancels: Please cancel appointments at least 24 hours in advance if you are unable to attend your session. The cancellation will be considered a "late cancel" if not enough notice is given. If you no show or "late cancel" 2 times, you will not be able to schedule in advance. Instead you will be required to call each day you would like to schedule to see if there is an opening that day. If you cancel more than 3 times in a 30 day period, you will not be able to schedule in advance. Instead you will be required to call each day you would like to schedule to see if there is an opening that day. If you do not keep that appointment, you will be discharged from therapy.

Lapse in Treatment: If you have had no therapy in a 30 day period, you will be discharged from therapy. A new referral will be required to begin treatment again.

Handling of Insurance

As a courtesy, my insurance company(ies) will be billed directly from your office and I authorize payment of medical benefits to Rehab Concepts. It is my responsibility to know the terms of my policy and I will be responsible for any copays, coinsurance and/or deductibles not paid by the insurance company.

Medical Release Authorization

I hereby authorize Rehab Concepts to release any or all of my medical or other information necessary to process my insurance claim or to contact and/or confer with my primary physician and/or referring physician regarding my illness/injury as it is related to my physical therapy treatment. The information released may include but is not limited to progress notes, referrals or doctor's prescriptions, diagnostic testing results from X-rays, CAT Scans or MRI's, or other related information.

HIPAA Privacy Notice

I have read and/or received a copy of Rehab Concepts Notice of Privacy Practices pages 1 – 6 (also referred to as HIPAA) and have been informed of my right to privacy and the ways in which my media/health information may be disclosed.

Worker's Compensation Cases

If there is no viable claim open at the commencement of your therapy then we will bill your medical insurance and you will be responsible for any deductibles, coinsurance and/or co-payments.

Automobile Accident Cases

We can only bill against auto policies that are in our patients' names. We do not accept third party insurance (other persons' insurance) or letters of protection from attorneys as payment for services. If there is no medical coverage on your auto insurance policy or if there is no viable claim at the commencement of your therapy then we will bill your medical insurance provider and you will be responsible for any deductibles, coinsurance and/or copayments.

Signature: _____ **Date** _____
Patient or Relative