



Dear Patient:

Physical therapy is an integral part of your physician's plan for your good health. The program that has been prescribed may have several elements. The exact price of each session depends on the treatment your therapist performs each time he/she sees you.

At your first visit, the therapist will perform an initial evaluation, which is required by law. The evaluation is a set fee, billed at \$150.00. What we get reimbursed varies based on negotiated in network rates. This assessment includes asking questions, further evaluation of your doctor's diagnosis and establishing a plan of care. This information will allow your therapist to meet your goals of physical therapy and that of your physician. The plan of care may also be provided to your insurance company upon their request.

After the initial evaluation all therapists bill in 15-minute increments. The 15-minute increments are defined anywhere from 8-15 minutes. This rate is \$65.00/15 minutes which is a median price for physical therapy in the greater Milwaukee market. All physical therapy clinics have codes that describe what is done in each session. The code of 97140 is manual therapy. Manual therapy is defined as hands on techniques such as mobilization/manipulation, myofascial release, soft tissue mobilization etc. The code of 97110 is therapeutic exercise. Therapeutic exercise is defined as exercise to develop strength, endurance, range of motion and flexibility.

The following is an example you may find on your bill:

1 unit 97140 Manual Therapy	\$65.00
2 units 97110 Therapeutic Exercise	\$130.00

In this example, manual therapy and therapeutic exercise are billed out at 1 unit and 2 units respectively. Each unit is 15 minutes or \$65.00. This total bill would be \$195.00 (45 minutes.)

Some of our procedures such as an ultrasound or electrical stimulation are billed out at a flat rate. Frequently, there will be more than one type of procedure performed on the same visit and often your visit will be billed in a 45 to 60-minute time frame.

Insurance companies may not reimburse the exact amount of what we bill because of a previously negotiated rate. For example, one insurance company may allow on average \$40.00 for each unit of 97140. If we billed one unit, your insurance would allow \$40.00. If you have a coinsurance that is owed, the percentage you pay is based upon the \$40.00 rate not on the \$65.00 rate that was billed. We also request that all co-pays (ex. \$5, \$10, \$15) be paid at the time of service. Please note that any amount due for supplies will be collected at the time of your visit. If you feel your insurance company will pay for therapy supplies, you may get a receipt and submit the claim yourself.

We hope this assists you in understanding your monthly statement. If you have any billing questions or concerns, please contact Jen in our billing department Tuesday & Thursday from 9:00-3:00. Thank you for choosing Freedom Physical Therapy for all your therapy needs.

Freedom Physical Therapy Billing Department

Patient's Signature