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Payment Policy

I have decided not to be a preferred provider for insurance companies; instead, I provide physical therapy on a “fee at time of service” basis.

You, the patient, are responsible for payment of the full fee at the time of each appointment. I accept cash, check, or credit / debit cards.

My fees are:

\$180 per one-hour treatment session

\$90 for cancellations with less than 24 hours notice

At the time of service and payment, you will receive a written statement that you can submit to your insurance company.

The amount of reimbursement you receive will vary according to the terms of your insurance policy. Prior to your first scheduled appointment, I recommend that you call your insurance company to clarify your physical therapy benefits and the amount of paid fees that will be reimbursed to you.

In addition to the written statement, some insurance providers will require extra documentation; I will provide this to you upon request, while addressing any privacy issues that may occur.

In the event that you need to cancel a scheduled appointment, I ask for the courtesy of 24 hours notice so that I can offer the appointment to other patients. If you do not give 24 hours notice of cancellation, except in cases of medical or family emergencies, you will be charged a \$90 missed-appointment fee.

I have read this statement of payment policy, and I understand and agree to my responsibility for payment for my physical therapy treatments.

Signature

Date