



Mary Allan Hand Therapy

Occupational Therapist / Certified Hand Therapist

ROC Physical Therapy 1635 Creekside Drive, Suite #101, Folsom, CA 95630 Phone:916-983-5611 Fax:916-983-5615

Patient Responsibilities

Insurance/Payment for services: As a courtesy, we will bill your insurance company for you with the information that you provide to us. However, it is your responsibility to make sure that your account is paid in full, including but not limited to co-pays, co-insurance, deductibles, and services not covered under the terms of your contract. *It is your responsibility to be familiar with your particular insurance plan's coverage.*

- Co-payments, deductibles and any outstanding balances are due prior to checking in for your appointment. You may choose to pay by cash, check, debit or credit card. Returned check fee \$25.00.
- If an insurance carrier has not paid within 60 days of billing, then fees are due and payable by you.
- Payment in full is expected within 90 days of billing, or your account may be turned over to a collection agency.

Attendance/Scheduling: In order to achieve the maximum outcome from your therapy sessions it is vital that you attend your scheduled appointments. The appointment time that we establish with you is time for 1:1 care with your therapist. If you fail to show for your appointment, that is time lost that another patient could be benefitting from therapy. Thus, we respectfully request that you:

- Arrive on time for your appointment and be prepared to participate.
- If you need to cancel or reschedule, Call at least 24 hours prior to your appointment. If you fail to provide 24 hours notice, you may be charged a \$50.00 "Cancellation" fee. This fee is not covered by insurance and will be due upon your next visit. This fee will be waived if you are able to reschedule the same day or within the same week.
- If you fail to show for a scheduled appointment, you will be charged a \$50.00 "No Show" fee. This fee is not covered by insurance and will be due upon your next visit.
- In the unlikely event that you miss 3 appointments, you will be discharged from our care and referred back to your physician.
- Please make arrangements for child care and do not have visitors, phone calls or cameras while in the clinic. Exceptions will be made for minor patients and caregiver training. Patients may be asked to use their own smart phone to take videos/pictures of their own exercises for reference at home.
- Mary Allan, Hand Therapy at ROC PT will provide an appointment reminder via email or text 48 hours prior to your appointment, and provide after-hours phone voicemail for you to provide timely notification, if you need to cancel or reschedule your appointment.

Consent to Treatment: You will achieve the best results in Hand Therapy if you complete the home program/exercises that you and your therapist establish together. Your Hand Therapist will collaborate with you and your physician to create an individualized treatment plan with your therapy goals in mind. Therapy may include, but is not limited to, the use of modalities such as heat, ice, electrical stimulation, cupping, IASTM, ultrasound, paraffin, wound/scar care, massage, manual therapy, as well as custom splint fabrication. Any of these treatments may create temporary skin irritation.

- By signing below, you authorize Mary Allan, Hand Therapy at ROC PT, to provide your evaluation and treatment, as prescribed by your ordering medical provider and/or described in the treatment plan by your therapist.

I have read and understand the above Patient Responsibilities, and I Consent to Treatment:

Patient Signature (legal guardian of minor patient): _____ Date: _____