



Insurance Billing Policy

Rehabilitative Health Services (RHS) is an approved provider with most insurance carriers, and we will submit claims to your insurance company in accordance with your coverage. While we will make every reasonable effort to assist you in obtaining the maximum allowable benefits from your insurance provider, you remain financially responsible for your account. This includes any unpaid balances after contractual adjustments (if applicable).

To ensure the most efficient processing of your claims, it is critical that you provide RHS with accurate and current insurance information. Please be aware that your insurance may not reimburse at the same rates as other participating providers. Certain insurance plans may require the patient to obtain Prior Authorization directly from the insurer. Failure to comply with such requirements may result in you assuming full financial responsibility for the charges incurred.

For Minor Patients or Patients with Legal Guardians:

The parent, guardian, or designated guarantor is responsible for payment in full at the time of service and for any remaining balances due. Unaccompanied minors must provide prior authorization from a parent or legal guardian. Statements will only be sent to the party responsible for payment, as indicated on the Patient's Intake Form. In the event of a credit balance, a refund check will be issued to the responsible party promptly.

For information specific to your insurance plan, please contact your insurance carrier directly.

Non-Medicare/Medicaid Plans:

I hereby assign my insurance benefits to Rehabilitative Health Services to be paid directly to them. I acknowledge that I am financially responsible for any services not covered by my insurance. I further authorize Rehabilitative Health Services to release any information necessary to process my insurance claims.

Medicare/Medicaid Advantage Plans:

I request that Medicare/Medicaid benefits be paid directly to Rehabilitative Health Services for services rendered by RHS and its affiliated providers. I authorize the release of my personal medical information to the Centers for Medicare and Medicaid Services (CMS) and their designated agents, to facilitate the determination of benefits or reimbursement for covered services. This authorization remains valid until I provide written notice of revocation. Medicare patients are required to sign an annual Advance Beneficiary Notice (ABN).

Sliding Scale Fee Discount or Cash Pay Program:

Rehabilitative Health Services (RHS) offers a sliding scale fee discount program for patients who are uninsured, underinsured, need services not covered by their insurance plan, or are experiencing financial difficulty in paying for care. Eligibility for the program is determined based on the patient's ability to pay and is granted without discrimination based on race, color, sex, national origin, disability, religion, age, sexual orientation, creed, or gender identity. If you would like to apply for the Sliding Scale Fee Discount or Cash Pay Program, please request a packet from our front desk or billing staff.