

GLOBAL PODIATRY PARTNERS, INC
(Drs. Chugo Rinoie and Wenjay Sung)

Name

Date

Custom Foot Orthotics: Financial information

If custom orthotics are an indicated procedure for you, as determined by our evaluation, the following information covers our fee policy. We take great pride in prescribing the finest custom biomechanical orthotics available. Prescription orthotics are a proven medical treatment for many conditions affecting the foot and leg. Orthotics are a cost-effective treatment to correct abnormal forces that cause pain and deformities. Often the use of orthotics can eliminate the need for long term drug therapy, physical therapy or surgical correction. Thus, they are covered by many insurance plans as therapeutic and preventive medical devices.

All payments for orthotics are the sole responsibility of the patient. Any insurance coverage is a contract between you and your insurance carrier. It is your responsibility as the patient to confirm whether or not your insurance carrier covers prescription orthotic devices and whether they cover the full amount. If your carrier does cover orthotic devices, we will be glad to assist you in billing your insurance, or with certain carriers, bill them for you. If your insurance carrier requires information on your medical condition to determine whether you are covered for prescription orthotics we will work with you to provide that information.

These codes will be used toward billing to your insurance:

97116 Gait Analysis	29799-LT Casting
L3000-LT Orthotic Device	29799-RT Casting
L3000-RT Orthotic Device	
95851-LT Range of Motion	Q4050-LT Casting Supplies
95851-RT Range of Motion	Q4050-RT Casting Supplies
95831-LT Muscle Testing	
95831-RT Muscle Testing	

Additional Pairs of Orthotics

The molds from which your orthotics are made can be stored for at least two years so you can have additional orthotics made. Additional pairs are available at an out of pocket discount in the first two years after receiving a pair of orthotics. Your 2nd pair cost with out of pocket discount = \$250. All subsequent pairs during this time frame are also at this discounted out of pocket price).

Comfort Guarantee and Breakage/Wear Guarantee

Although it is not possible to guarantee clinical outcomes we do offer an orthotic *comfort* guarantee. If devices are not comfortable, we will adjust or redo the orthotics at no cost with the first 30 days. If a visit for an orthotic adjustment includes treatment other than orthotic adjustments, standard office visit charges-including co pays-apply. In the rare instance when a patient is not comfortable in their orthotics, the orthotics can be returned, within 30 days, and patient out-of-pocket expenses will be refunded, insurance payments will not be refunded. No orthotic returns will be accepted after 30 days. Adjustments are sometimes necessary to ensure comfort. Polypropylene orthotics are guaranteed against breakage for 5 yrs. Graphite and other materials are guaranteed against breakage for 1 year. Soft materials, such as covers and cushioned pads, are guaranteed for 6 months.

Office Visits

There is a no-charge visit with the medical assistant for pick up and wearing instructions. If it is necessary to see the doctor for any reason other than fitting of orthotics, or you request that this visit be with the doctor, than an office visit will be charged. Subsequent follow-up visits are not included in the orthotic cost unless prior arrangements have been made.

If additions to the orthotics, such as cushions or accommodations, are later required, there is no charge within 30 days of your receiving the orthotics. After that period there is a charge to cover the cost of materials. If further treatment of your condition is rendered, this is not included under the orthotic fee.

We will attempt to contact your insurance company and confirm your coverage prior to casting for your orthotics. A deposit equal to what your insurance carrier states is your out-of-pocket responsibility is due at the time of casting. If we cannot confirm coverage, a deposit of \$55 is due at the time of casting. *Any amount deposited that is greater than your responsibility will be refunded upon payment by the insurance company.*

When ordering additional pairs, deposit of \$55 is due at the time devices are ordered. Any remaining orthotic balance is due before orthotics are dispensed. If you expect your insurance to pay, please contact your carrier before picking up devices to confirm payment.

STATEMENT OF FINANCIAL RESPONSIBILITY

I have read the above information and understand that I am responsible for payment of all costs for my prescription orthotics. If a referral or pre-authorization is necessary in order for insurance to pay for the orthotics then I have confirmed that there is preauthorization. If necessary preauthorization or referral is not on file then I accept full responsibility for payment. I understand that additional materials, such as covers for the orthotics, are an additional charge. I understand that the refundable deposit is due at time of casting regardless of whether my insurance company has stated they will pay for orthotic devices.

Signature

Date