



# Great Falls Physical Therapy

## CANCELLATION / FEE SCHEDULE / CONSENT TO TREAT POLICY

### Cancellation Policy

Great Falls Physical Therapy requires 24-hours' notice for all non-emergency cancellations. If a patient does not cancel within this time frame an \$80 fee will be charged. Please refer to *Attendance Policy form for more information.*

### Fees

- Physical Therapy Evaluation: \$185
- Physical Therapy Re-Examination: \$170
- Physical Therapy Follow Up: \$160
- Athletic Training/Dance/Wellness Assessment: \$160
- Athletic Training/Dance/Wellness Follow Up: \$135

*\*GFPT will submit claims on your behalf and insurance will reimburse you directly. Please refer to **Insurance Checklist form** for an approximate reimbursement rate for services.*

### Payment Policy

Great Falls Physical Therapy requires payment for all services at the time of the treatment session. If payment is not given after 2 treatment sessions a patient/client will not be able to receive further treatment until the balance is paid in full. If the cost of treatment is too great the patient/client may inquire about plans and options to allow continued care.

### Consent to Treatment

I consent to the procedures which may be performed at my physical therapy evaluation and during the duration of this treatment.

**Signing below indicates that you understand and agree to the terms of this policy.**

\_\_\_\_\_  
Signature of Patient or Responsible Party

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name