



Patient Insurance Worksheet

We accept all insurances that have out-of-network benefits. If you do not have out-of-network benefits, please call us at 212-213-4660 to discuss our popular payment plans & generous discount programs. We also have payment plans for patients with high deductibles.

For accurate information call the member services toll free number on your card. Make sure you speak to a human being, do not use the automated system. Please call us at 212-213-4660 after you obtain your benefits information.

Name of person you are speaking with _____ Time of day _____

Tracking ID for the call or representative ID _____

1 - How much is my out-of-network deductible? _____

2 - How much of my deductible has been met? _____

3 - What is my co-insurance percentage? (ie: 40%, 30%, 20%, 10%) _____

4 - Does my policy require pre-authorization like ORTHONET for physical therapy services? Y / N

5 - How many out-of-network physical therapy visits do I have? _____

6 - Is there a max \$ cap that my plan pays for out-of-network physical therapy? Y / N

I understand that I am responsible to obtain accurate information about about my insurance benefits so that Renew PT can bill them correctly on my behalf. If the above information is inaccurate, I will be responsible for paying the balance for my visits to Renew PT.

If you need help or have any questions, please don't hesitate to call us at 212-213-4660.

We look forward to helping you get the results you desire.