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TO: All Medicare Patients

FROM: Billing Department

DATE: January 1, 2008

RE: MEDICARE CAP

Thank you for choosing Rehab Connection for your outpatient physical/occupational therapy needs. Medicare has implemented a limit on the amount they will cover for your therapy.

Effective January 1, 2008, Medicare will allow a maximum payment of \$1810 for outpatient physical/speech therapy combined and \$1810 for occupational therapy. This means, after your deductible of \$135 has been met, Medicare will pay 80% (\$1448.00) and you will be responsible for the additional 20% (\$362.00) if you do not have a secondary insurance.

Generally this allowance translates to an average of 12 – 15 visits depending on the type of service rendered. Medicare also requires each patient to have a prescription from your referring physician as well as a certified plan of care.

Should you require additional therapy services after your Part B limit has been reached, your therapist will discuss other options for continued care. In the event you decide to continue treating with Rehab Connection, your insurance may not cover your treatment and the patient/patient's power of attorney will be financially responsible for services rendered.

If you have any questions, please feel free to speak with the Billing Department. We will be happy to assist you.