



## MEDICARE FINANCIAL LIMITATION NOTIFICATION FORM

Effective January 1, 2017, the Center for Medicare and Medicaid Services (CMS) implemented a Financial Limitation, or Cap, totaling \$1980.00 for Medicare Part B outpatient services for Physical, Occupational, and Speech therapy services.

The purpose of this notice is to help you make an informed choice about whether or not you wish to continue to receive outpatient physical, occupational or speech therapy after the Medicare Cap has been met, knowing you will be financially responsible for these services.

CMS's financial cap will be applied in the following manner for outpatient services:

- **Physical and Speech Therapy share a \$1980.00 Cap for both therapies combined.**
- **Occupational Therapy has a separate \$1980.00 Cap for services.**
- **These financial limitations will be effective until December 31, 2017 unless otherwise changed or suspended by CMS.**

Medicare will subtract your co-insurance from the \$1980.00 cap and pay 80%. The 20% co-insurance will be paid by you or a supplemental insurance you may have. These limits are based on the Medicare fee schedule allowed amount. The cap will be based on services paid by Medicare at the allowable rate, not the provider's charges.

As Medicare providers, we are obligated to inform you of this financial limitation and Medicare's determination that once the \$1980.00 cap for Physical, Occupational and/or Speech therapy benefit is met, you will be financially responsible for any services provided, unless you qualify for a Cap exception. As a courtesy, we will track the services you receive from us and notify you when the amount is close to reaching the limit. You will then be able to make a decision whether or not you want to continue therapy and accept financial responsibility for the cost of any medically necessary care provided. Any therapy services received at a Hospital Outpatient Rehabilitation department is exempt from the financial limitation imposed by Medicare.

The \$1980.00 financial limitation is your annual Medicare insurance benefit for all non-hospital based therapy providers combined. If you received PT, OT or Speech prior to attending therapy at our clinic, those services will be included in your limitation total. **Please assist us in ensuring you stay within the cap limits by informing us of any physical, occupational or speech therapy services you received between January 1, 2017 and today.** We will try to estimate as closely as possible the amount of cap used at the prior clinic and add that amount to your beginning balance.

### Medicare Therapy Cap Exceptions

There may be a way to qualify for medically necessary therapy services beyond the financial limitation. Your therapist will discuss your status with you as you near the cap. If you do not qualify for an exception, you will be responsible for continued care beyond the limitation. Ask our staff what the estimated costs may be.

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Patient Signature

\_\_\_\_\_  
Date