



PHYSICAL THERAPY

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Effective 1/1/2012

The Centers for Medicare and Medicaid Services has placed an annual limit or cap for outpatient rehabilitation services. The annual limits are as follows:

- \$1880 for Physical Therapy Services and Speech pathology Services
- \$1880 for Occupational Therapy Services

(This annual limit does not apply to hospital outpatient physical therapy services.)

This is approximately 18 physical/speech treatments and 18 occupational therapy treatments and the limit is calculated based on charges that are considered or allowed by Medicare.

There is an exemption process in place whereas additional visits beyond the annual limit may be allowed based on your diagnosis and the medical necessity of the services. Please consult your therapist for additional information.

Patient's Name _____ Medicare number _____

During the last 30 days, have you been admitted to a hospital or a skilled nursing facility?
Yes _____ No _____

If yes, what hospital or skilled nursing facility were you admitted to and what were the dates attended; where _____ dates _____

During 2012, have you received any physical therapy, occupational therapy, speech therapy, or chiropractic services?

Yes _____ No _____

If yes, where did you receive these services and when were the services received; where _____ dates _____

I understand that Medicare has placed an annual limit on outpatient services for 2012. I have disclosed all prior therapy received within the 2012 calendar year.

Patient's Name

Date

witness