

MEDICARE GUIDELINES

To make dealing with Medicare as simple as possible, we have established the following guidelines. Keep in mind that Medicare regulations change frequently and therefore, these guidelines may have to be updated as Medicare rules change.

- **We will file ALL Medicare claims.** (By federal law, we must bill Medicare for all services that are covered under the plan, unless you tell us otherwise.)
- We will file **ALL** Medicare Secondary/Supplemental Insurance, if available.
- **We ARE participating providers with Medicare**, which means that Medicare pays us directly. Medicare patients must meet an annual deductible of \$162, which we are required to collect at the beginning of services for each calendar year. Supplemental coverage may pay the deductible. But if no such coverage is available, you are responsible for the deductible before Medicare will pay.
- **Medicare WILL NOT PAY for ALL of your care! Medicare pays for 80% of allowed charges.** Supplemental coverage may pay the other 20%. But if no coverage is available, you are responsible for the 20% not covered by Medicare.
- **Medicare does NOT pay for maintenance care.** This will be your responsibility. Maintenance Chiropractic care is important to maintain your improved health status after the symptoms have resolved and maximum improvement is achieved.
- **Medicare does NOT pay for all of your health care costs.** Our recommendations for care are based on the requirements to help you achieve maximum health benefit and are not based on the limits and restrictions of your Medicare coverage or any insurance limitations for that matter.

MEDICARE DOES PAY FOR:

1. Chiropractic Adjustments
 - If supported by X-ray and/or examination.
 - After deductible is met.
 - Depending on the condition

MEDICARE DOES NOT PAY FOR:

1. Examinations
2. X-Rays
3. Physical Therapy
4. Chiropractic Adjustments for Maintenance
5. Products and Supplies

If you have any questions regarding these guidelines, please ask. We are here to help you!

If you do not like the limits of your Medicare coverage, please contact your government representatives to recommend they expand Chiropractic Medicare coverage.

I have read and understand the limitations of my Medicare coverage and agree to be personally responsible for the payment of non-covered services if I choose to receive those services.

Signature of patient or person acting on patient's behalf

Date