

Kinex Podiatry Foot & Ankle Clinic

Custom Foot Orthotics - Financial Information Form

If custom orthotics are necessary for you, as determined by our evaluation, the following information covers our fee policy.

Orthotics are a cost-effective conservative treatment to correct abnormal foot and ankle pain and deformities. Orthotics can eliminate the need for long-term drug therapy, physical therapy and surgical correction. Therefore, in some cases, not all, they are covered by insurance plans.

All payments for orthotics are the sole responsibility of the patient. Any insurance coverage is a contract between you and your insurance carrier. **It is your responsibility, as the patient, to confirm whether or not your insurance carrier covers the prescription custom orthotics, and whether they cover the full amount.** If your carrier(s) does cover the orthotic device, we will be glad to assist you in billing your insurance(s). If they require information on your medical condition to determine whether you are covered, we will work to provide that information for you.

The cost of your orthotics, including billing to your insurance, is listed below:

INSURANCE CODE	ITEM	COST	DISCOUNT
L3000 - RT	ORTHOTIC- RT FOOT	\$ 300.00**	Cost with 20% admin discount, if insurance not billed and balance paid in full at time of casting: \$ 480.00** (self pay option)
L3000 - LT	ORTHOTIC- LT FOOT	\$ 300.00**	
	ORTHOTIC TOTAL:	\$ 600.00**	

** extra materials have additional charges (manufacture cost)

20% Administrative discount is applied if insurance does not need to be billed (e.g. self-payment). If insurance does not cover your orthotic device, we offer a 20% discount off the \$600.00 cost of the orthotic if paid in full, at the time of casting.

Additional Pairs of Orthotics

The molds casted for your orthotics are stored electronically and can be reused, in case you require additional pairs made. Additional pairs are billed at \$462.00.

Wear & Breakage

Adjustments or re-do the orthotic at no cost within 30 days of getting your orthotics. No orthotics returns will be accepted after 60 days. The orthotics manufacturer we utilize (NewGen) does offer lifetime polypropylene breakage warranty, a one-year graphite breakage warranty and children and adult "extended" warranties. For more information, please refer to the information packet that accompanies your orthotics.

A deposit equal to what your insurance carrier states is your out-of-pocket responsibility is due at the time of casting. If coverage can not be confirmed, a deposit of \$200 is due at the time of casting. Upon payment by insurance, any deposited amount greater than your responsibility will be refunded.

When ordering additional pairs, a deposit of \$200 is due at the time devices are ordered. Any remaining balance is due before the orthotics are dispensed. If you expect your insurance to pay, please contact your carrier before picking up the orthotics to confirm payment.

Statement of Financial Responsibility

I have read the above information and understand that I am responsible for payment of all costs for my prescription orthotics. **If a referral or pre-authorization is necessary in order for insurance to pay for the orthotics then I have confirmed that the pre-authorization is done.** If necessary pre-authorization or referral is NOT on file then I will accept full responsibility for payment. I understand that additional materials are an additional charge. **I understand that a deposit is due at the time of casting, regardless of whether my insurance company has stated they will pay for orthotics devices.** I understand that these prices are based on the manufacturer's cost, and can be changed accordingly without notice.

NAME: _____

SIGNATURE: _____ DATE: _____