Patient Right: Estimate of Cost of Services

Advanced Rehabilitation, Inc. will provide all patients **who do not have insurance or who are not using insurance** an estimate of the bill for therapy services. Please retain a copy of your "Good Faith Estimate" (GFE) quote.

- Our initial estimate will be for the cost of the first visit, which will be for the evaluation. This estimate will be provided to you at least one (1) business day prior to the evaluation or prior to scheduling if you prefer.

- Before commencing with a treatment, a second estimate will be provided to you based on the established Plan of Care. If your Plan of Care needs modification during the episode of care because of your therapy needs, a new condition, or per your request, you will be informed and provided with a new estimate, and you will have the option to continue or cease treatments.

- If you receive a bill that is $400 or more than the "Good Faith Estimate," you can dispute the bill utilizing the Patient-Provider Dispute Resolution Process. The dispute resolution entities (SDR) are certified and selected by Health & Human Services (HHS). You must submit a dispute notice, the provider's bill, and the "Good Faith Estimate" to HHS within 120 days of receiving the final bill from our practice. HHS will collect a $25 fee with your dispute resolution application.

For questions or more information about your right to a Good Faith Estimate, visit www.cms.gov/nosurprises or call Advanced Rehabilitation, Inc. at 812-547-7770.