



## PARMENTER PHYSICAL THERAPY

**Patient:**

**Self Pay No Insurance**

**The No Surprises Act Eff January 1, 2022**

**Date:**

**CASH PAY NO INSURANCE**

**Treatment Plan**

The following Physical Therapy treatment plan is provided to you for our Cash Pay, No Insurance patients. The total charges per visit are listed below.

**Good Faith Estimate  
Patient Out of Pocket Per Visit**

**Initial Visit + treatment - 1 hour: \$170**

**Initial Visit + treatment - 30 min: \$115**

**Per Visit Rate - 1 hour: \$140**

**Per Visit Rate - 30 min: \$85**

**5 Visits Prepayment Treatment Plan - 1 hour visits: \$620**

**Senior/Military Initial Visit + treatment: \$135**

**Senior/Military Per Visit Rate - 1 hour: \$115**

**You will not be expected to pay any more than the per visit rate quoted above.  
I have read and understand the above Good Faith Estimate. I am financially responsible for charges  
associated with any and all services received.**

\_\_\_\_\_  
Signature: \_\_\_\_\_

\_\_\_\_\_  
Date: \_\_\_\_\_