



Out of Network Worksheet

Federal Tax ID #:	45-2900515
Group NPI #:	1700169745

The **T**ax **I**D **N**umber (TIN) provided for our business; you can use this to have the insurance company look us up in their system.

This is the **N**ational **P**rovider **I**dentifier we bill under; can also be used to search in the insurance company's system.

Estimated Cost

Keep in mind that these are estimates from the applicable insurance company websites and that costs towards deductibles can cost anywhere from \$50-200 per visit. Once deductibles are met, you're plans coinsurance will apply.

Self-Pay at Lodo PT		Out-of-Network		Cigna (In-Network examples)			Aetna (In-Network examples)		
Initial Evaluation	\$125	Initial Exam	\$210-240	HSA Bronze 5500	Deductible, then 30%	Out of pocket until deductible met	HealthNet Open Access	Deductible, then 20%	Out of pocket until deductible met
Follow-Up Visit	\$90	Follow Up	\$180-190	HSA Bronze 6700	Deductible, then 50%	Out of pocket until deductible met	ManagedChoice Open Access	Deductible, then 20%	Out of pocket until deductible met
				Cigna Flex Gold 1300	Deductible, then 20%	Out of pocket until deductible met			
				Cigna Flex Silver 2500	Deductible then 40%	Out of pocket until deductible met			

Average Drive Time and Distance to In-Network Clinic (from Union Station)

Clinic	#1		Miles	#2		Miles	#3		Miles	Lodo Physical Therapy			
Time of Day	Morning	19 min	2.5	Morning	27 min	7	Morning	14 min	5	Morning	7 min	< 1	
	Lunch	16 min		Lunch	24 min		Lunch	13 min		Lunch	5 min		
	Evening	18 min		Evening	28 min		Evening	15 min		Evening	4 min		