



MARYLAND CENTER FOR PHYSICAL THERAPY

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Insurance Company	Benefit Coverage		Required at time of Initial Evaluation		
	In Network	Out of Network only	Primary Care Referral	Prescription from a Doctor	Pre-Authorization
Alliance (One Net)		X		X	After 1st visit
Aetna	X				
Amerigroup	X		X	X	After 1st visit
Beechstreet	X				
BC/BS PPO & POS	X				
BC/BS Federal	X				
BC/BS National Accounts	X				
BC/BS State of Maryland	X				
Blue Choice	X		X		After 1st visit
Bravo Health	X			X	After 1st visit
Cigna PPO	X				
Core Source		X			X
EHP	X			X	After 12th visit
Fidelity	X			X	
First Health	X				
Great West Life	X				
Mailhandlers	X				
MAMSI	X		need 8 visits		After 8th visit
MDIPA	X		X		X
Medicare	X			X	
MHIP	X			X	X
NCAS	X				
Optimum Choice	X		X		After 8th visit
PHCS	X				
Priority Partners	X		need 6 visits	X	After 1st visit
Prudential	X				
Slip & Fall Accidents**	X			X	
United Healthcare HMO/PPO	X		X		After 1st visit
Unicare	X			X	
US Family Health Plan	X				
Workmans Compensation	X			X	Before 1st visit

*Claims will be submitted to **your** automobile insurance company until the personal injury protection (PIP) coverage has been exhausted, then claims will be submitted to **your** health insurance until settlement.

Slip & Fall accident claims will be submitted to **your health insurance company unless other payor authorization is received.

All benefits vary. We will need all insurance (and attorney information if applicable) at the time of scheduling the initial evaluation so insurance coverage can be verified.

We have a self pay rate for those with out health coverage. We take Medical Assistance as a secondary ins.

Orthopedic & Sports Physical Therapy ■ Rehabilitation ■ Exercise Prescription ■ Spinal Rehabilitation

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