

Office Fee Schedule and Financial Policy

<u>Service</u>	<u>Max. Fee</u>
Consultation	No Charge
Initial Complete Examination	\$110
Initial Full Spine X-Rays	\$100
Adjustment	\$40
Medicare Adjustment	\$40

Financial Policy

We are committed to providing you with the best chiropractic care possible in a caring environment and have established our financial policies to achieve that goal. **You will be expected to pay for your examination, x-rays, and any other services at the time service is rendered.**

- Self-Ensured (Cash):** If you do not have health insurance, do not think you can't receive chiropractic care. Our fee systems were designed for people just like you to get the care that you need, at an affordable price. In these days of HMO's, PPO's and all other O's, we have found that most insurance policies greatly limit the quality of care that one expects and deserves. Many of our patients do not have health insurance benefits, but find that the quality and price of their care is exceptional. If you are accepted as a chiropractic patient in our office, the fee system that you qualify for will be explained to you at that time.
- Health Insurance:** As a courtesy, our office will file your insurance claims for you. However, please remember that your agreement with your insurance company is between you and them. Our fees and financial policies were designed for individuals and families without any chiropractic insurance benefits. However, if your insurance contributes to chiropractic care, it is very user friendly in our office. *Our office will NOT file any secondary insurance claims for you if you have a secondary insurance.* If this is the case, we will give you all the information you need to get reimbursed. As an additional courtesy, our Chiropractic Team will also verify your insurance contribution over the phone. This verification is not a guarantee of payment. If you have any questions regarding insurance and how it works in our office, as our insurance expert.
- Medicare:** Our office does accept Medicare. We will file all Medicare claims for you. The only "allowable charge" by their definition is "manual manipulation of the spine." We call this an *adjustment*. **Medicare will not allow or reimburse for any examination, x-ray, special consultation, traction, or any other charges.** There is also a 12 to 20 visit limit on chiropractic care in any 12-month period. After this limit is reached, please be advised that you will receive a letter from Medicare stating that any further visits are "unreasonable and unnecessary." Please be advised also that every *Medicare* beneficiary receives this same letter after 12 to 20 visits. *Our office will NOT file any secondary insurance claims for you if you have a secondary insurance.* If this is the case, simply mail them a copy of the "Explanation of Benefits" (EOB) you receive from Medicare along with your claim form, and they will communicate with you about your reimbursement.
- Auto Accident/Workman's Compensation/Personal Injury Cases:** These are special cases with special forms to fill out. These probable have been explained to you in detail already. In most cases, we will wait for your insurance company to pay the *majority* of your bill. We will however, require that *you* pay us directly for *one* adjustment per week if you are accepted as a chiropractic patient. Non-Medicare fees apply.

I have read and I understand the above policies. I have initialed the one that applies to me.