

8330 SW 8th Street, Miami, FL 33144-4180 Tel: 305-551-1600 Fax: 305-264-6942

To: Patients Paying at the Time of Service

In an effort to minimize costs and create the best possible atmosphere for healing, we have made the following adjustments to our Usual and Customary Rates. We are able to do this because paying at time of service frees this office from time-consuming paper work and tracking of filed insurance claims.

At your initial visit, you will be responsible for the New Patient office visit. The bill will show the office visit and my fee. However, there are several procedures that may occur during your visit, which will be modified. Any of the following procedures used during your treatment will be reduced to \$0.00, and you will be responsible for the office visit fee only.

97810-52	Acupuncture 1st 15 min	99070-52	Needles
97811-52	Acupuncture Add'l 15 min	97016-52	Vaso-Pneumatic
97813-52	Acupuncture w/Elec Stim 1st 15 min	97026-52	Infrared Light
97814-52	Acupuncture w/Elec Stim Add'l 15 min	97110-52	Therapeutic Exercises
97014-52	Microelectric Current (Unattended)	97140-52	Manual Therapy
97032-52	Microelectric Current (Attended)		

The fee for the New Patient office visit (code 99203) is **§ 120.00** for patients paying at time of service.

The fee for each office visit after the initial visit (code 99213) is \$\\$80.00 for patients paying at time of service.

I, (PRINT NAME)	Elmo	
have read and unders	tand the information	contained therein.
Patient's Signature		Date 3/18/2017
Yours in Health,		

Chao-Lung Liu, AP Pei-Lu Betty Chang, AP Acupuncture Physicians