



MATRIX REPATTERING FEE SCHEDULE

INITIAL ASSESSMENT: (1 HOUR) \$160.00

SUBSEQUENT VISITS: ½ HOUR \$80.00
 45 MIN \$120.00
 1 HOUR \$160.00

PLEASE NOTE: DR. BARBARA BROWN IS A DESIGNATED DOCTOR OF CHIROPRACTIC (DC), AS WELL AS A CERTIFIED MATRIX REPATTERING PRACTITIONER (CMRP).

IF YOU HAVE THIRD PARTY COVERAGE, YOUR INVOICE WILL REFLECT HER CHIROPRACTIC TITLE, UNDER WHICH SHE PRACTICES MATRIX REPATTERING.

WE DO NOT DO DIRECT BILLING TO INSURANCE COMPANIES FROM OUR OFFICE. WE WILL PROVIDE YOU WITH AN INVOICE THAT YOU CAN SUBMIT PERSONALLY SO THAT YOU CAN RECEIVE YOUR BENEFITS. YOUR INVOICE WILL INCLUDE EVERYTHING YOUR INSURANCE COMPANY WILL NEED TO PROCESS YOUR CLAIM.

WE REQUIRE **24 HOURS NOTICE FOR CANCELLATIONS** OF ANY APPOINTMENTS. IF WE DO NOT RECEIVE THIS NOTICE, WE DO CHARGE FULL FEE FOR THE MISSED APPOINTMENT. THIS TIME IS NEEDED TO RESCHEDULE THAT TIME SLOT FOR A PATIENT ON OUR WAITING LIST. THANK YOU FOR RESPECTING THIS POLICY.

I HAVE READ THE ABOVE, AND ACKNOWLEDGE THE ABOVE INFORMATION. I AM AWARE THAT I MAY ASK ANY QUESTIONS ABOUT THIS FORM AT ANY TIME.

NAME (PRINT): _____

SIGNATURE: _____

DATE: _____