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FEE SCHEDULE AS OF JANUARY 2010	
DISCOUNTED RATE FOR PAYMENT IN FULL AT TIME OF SERVICE	FEE
New Patient – First Office Visit	110.00
Established Patient – Evaluation and Treatment	80.00
CPT CODE – DETAILS OF SERVICE	FEE \$
97810 – First 15 minutes of Acupuncture	55.00
97811 – Additional 15 minutes of Acupuncture	40.00
97813 – First 15 minutes of Electro-Acupuncture	65.00
97814 – Additional 15 minutes of Electro-Acupuncture	45.00
99201 – New Patient	50.00
99202 – New Patient	88.00
99203 – New Patient	132.00
99204 – New Patient	187.00
99205 – New Patient	238.00
99211 – Established Patient	30.00
99212 – Established Patient	52.00
99213 – Established Patient	72.00
99214 – Established Patient	113.00
99215 – Established Patient	164.00
97140 – Tui-na massage / 15 minute unit	30.00
97139-59 – Moxibustion or Cupping / 15 minute unit	30.00
97026 – Infrared Therapy / 15 minute unit	25.00
99049 – Missed Office Visit	25.00
99382 – Telephone Consultation > 15 min	30.00
97154 – Additional 15 minute unit	20.00
Smoking Cessation: Up to 3 visits per week. May be repeated. Shorter appointment time. Must be paid in full at first visit.	150.00
DISCOUNTED RATE FOR ELDER S OVER 63 (MUST BE PAID IN FULL AT TIME OF SERVICE TO APPLY)	
New Patient – First Office Visit	85.00
Established Patient – Evaluation & Treatment	65.00
HOUSE CALLS	
Cost for visit as outlined above + fee which includes drive time, carrying equipment, etc.	30.00 / hour
HERBAL CONSULTATIONS *	
New Patient – First Office Visit	75.00
Return Visit – 45 Minutes Pro-rated According to time spent with patient. This also includes phone consultations.	60.00
ADMINISTRATIVE/COPY CHARGES	
Report Fee	20.00
First 30 Copies	0.91 / page
After 30 Copies	0.67 / page

I am happy to bill your insurance company. It is **your** responsibility to determine the coverage of your provider and to pay the cost of treatment not covered by your plan. *Note that insurance does not reimburse acupuncturists/herbalists for the time spent consulting about and formulating herbal medical prescriptions, therefore this must be paid out of pocket. If the outlined fee schedule above makes treatment prohibitive to you, please contact me to consult about possible sliding scale or deferred payment arrangements. I will do my best to work with you in order to make treatment accessible.

A \$50 fee will be charged for appointments missed with less than 24 notice of cancellation.