

Meier Family Chiropractic 3419 Central Ave Suite C Billings, MT 59102

Financial Agreement

We appreciate and thank you for choosing our office for your chiropractic needs. We would like to clarify the financial aspect of your care so we may direct all of our attention to helping you get well.

FIRST VISIT

On your first visit you will watch a First Patient Video. You will then meet with the doctor to discuss your current health situation and to see if you are a good candidate for chiropractic care. After the determination has been made, the doctor will conduct a thorough examination. This helps us identify the likely cause(s) of your problem.

Associated fees include:

Physical, ortho and neuro exam - \$68	
Spinal Adjustments	\$46 - \$56
X-rays range from	\$65.91 to \$ 70.82 (X-rays will be taken only if the doctor deems necessary.)
Muscle Stimulation	\$25 (optional)

SECOND VISIT (ROF)

At your Report of Findings visit, we will have you watch a video regarding the 2nd visit.

Associated fees with 2nd visit:

Spinal Adjustment	\$46 - \$56
Muscle Stimulation	\$25 (optional)

REGULAR VISIT

Your care consists of specific adjustments to add motion to spinal segments that are not moving correctly and restore nervous system integrity. Retraining the spine takes time. Each visit builds on the ones before. Some patients see rapid progress and others find their recovery slower.

Spinal Adjustments	\$46 - \$56
Muscle Stimulation	\$25 (optional)

PROGRESS EXAMINATION

We will monitor your progress with periodic exams every 12 visits or 30 days, whichever comes first. These findings help document your recovery. We may modify your visits based on these results.

Brief examination	\$35
Spinal Adjustment	\$46 - \$56
Muscle Stimulation	\$25 (optional)

Billing

Outstanding patient balances will be billed monthly. Should my account become delinquent, I agree to pay collection costs, attorney fees and court costs as permitted by law if such are incurred by my physician at Meier Chiropractic. We will pass along the bank charge of \$20 for any returned checks. If your case is a Personal Injury Case or Workers Comp case and you decide to terminate care against the doctor's advice, the entire balance will immediately become due and payable.

Agreement

This is the entire financial agreement between Meier Chiropractic and the patient below. I have read this agreement, understand it and agree with its provisions.

Patient or Responsible Party _____ Date _____