Robert C Slater BA, MSC, CME, DC, DACO: Healing Hands Wellness Center 631 Cleveland Ave S #1 St Paul, MN 55116

Dr Robert C Slater, primary care chiropractic physician has earned his public trust, authority and respect to administer medically needed chiropractic with complete confidence. He knows what spinal and therapy care you need by experience gained in serving thousands of people over the past 37 years. That safe and effective spinal and extremity care alleviates suffering from injury, as well as to promoting healing and wellness there can be no doubt. You as an individual in seeking the best of care at his clinic will be a valued part of this confident tradition of integrity and helpfulness.

Dr Robert C Slater DC remains in good standing with the Minnesota Board of Chiropractic Examiners. Dr Slater has achieved some of the high levels of education and accomplishment within his professional life. Of the 70,200 odd DC's in the USA, less than 200 have achieved Diplomate of Orthopedic credentials, which places him academically, with all his years of experience, in the top 97% of his profession. Dr Robert C Slater is also an ordained minister for the past 20 years, serving the public within his profession as a trusted councilor when needed. In this regard, he is also there to help you and your loved one through the Four Celebrations of life: Birth, Puberty, Marriage and Death.

Cash or Insurance Client Agreements and Expectations

<u>Patient Expectations:</u> you can expect to be received in a prompt, friendly and professional manner at all times, receive state of the art spinal/extremity treatment, and be assured the knowledge that staff and doctors at this clinic are your health partners for life.

<u>Arrival</u>: Verbally check in at the front desk, take off jewelry that may interfere with your treatment, place cell phone on vibrate, schedule all future visits in advance.

<u>Partially Covered Insurance Patients: [Such as any commercial carrier or Federal Medicare or Medicaid insurance]</u>

All cash schedules noted below are agreed to by patient and this is sufficient authority, given the full disclosure of regular fees, for any such discounted fee payment to occur.

\$55.00 (\$145.00) [99203] for examination/consultation [62% discount]
\$34.00 (\$109.00) [99213] for re-examination/consultation [69% discount]
\$35.00 (\$75.00) [98941] for 3-4 Region Chiropractic Manipulative Treatment [53% discount]
\$22.00 (\$55.00) [98943] for Extremity/Cranial Chiropractic Manipulative Treatment [60% discount]
\$12.00 (\$40.00) [97010] for modality [Hot/cold, EMS, US, mechanical traction] [70% discount]
\$15.00 (\$50.00) [97140] for procedure [manual traction, manual therapy) [70% discount]
\$20.00 (\$65.00) [97110] per service [exercise therapy/instruction] [70% discount]

Established insurance will usually cover between 6 to 25 a year, depending on your contract. This coverage is if and only if your treatment is initially deemed "active acute care only". Typically, commercial insurance policies will cover partial payment for a spinal adjustment only and 1 or perhaps 2

modalities. Insurance deductibles will be determined on the first visit, and along with copayments, are due to the time of service.

I understand the limits of my insurance plan, services covered or not covered, to what degree they are covered, unpaid deductibles and amount of my co-payments. I further agree to make cash payment at the time of service for non-contracted services according the fees noted above:

My preference for treatment frequency at this time, based on the doctor's review of my past history and current medical findings is:

B-Medium-term: between 2 to 3 months care at a frequency of 1 or 2 visits per week. C-Long term: greater than 4 months at a frequency of 1 visit each month.	
Patient's Printed Name and Signature:	Date
Doctor's Printed Name and Signature:	

A-Short-term: 4 to 10 visits as a therapeutic trial over a 1 month period.