

## **Bodhi Naturopathic Fee Schedule** (effective August 1, 2024)

CPT	Description	Fee	Time of Service
Code			Fee
			(as of 8/1/24)
99205	First Visit, 60-75 minutes*	\$515	\$450
99204	First Visit, 45-59 minutes*	\$455	\$425
99215	Established patient visit, 40-54 min*	\$290	\$250
99214	Established patient visit, 30-39 min*	\$275	\$235
99213	Established patient visit, 20-29 min*	\$195	\$180
	(typically only for acute illness,		
	quick med renewal)		
99417	Additional 15 minutes	\$90	\$68
	(per 15 min)***		
99358	Prolonged care, not on date of	\$275	\$235
	service, 31+ minutes		
99245	Consultation, PCP Referral, 80 min	\$545	\$470
	(with referral only)		
99244	Consultation, PCP Referral, 60 min	\$485	\$445
	(with referral only)		
99050	Services when office usually	\$80	\$55
	closed***		
99051	Services outside of 9-5 business hours	\$70	\$45
	(includes visits after 5pm)***		
99395	Established patient, annual exam ONLY,	\$307	\$255
	18-39 years **		

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INTEGRATIVE MEDICINE

99396	Established patient, annual exam ONLY,	\$307	\$255
	40-64 years **		
99617	Emotional assessment/screening***	\$75	\$25
99199	Unlisted reports/services***	\$160	\$130
99372	Therapeutic injection***	\$52.50	\$45
99406	Smoking counseling <10min ***	\$32	\$20
99407	Smoking counseling 10+ min ***	\$55	\$35

<sup>\*</sup> All time calculations include same day chart review, face to face time, lab review, documentation, health counseling, coordination of care

The following are services that are Non-Reimbursable, regardless of the type of insurance you carry and are the responsibility of the Patient:

		Fee (as of 8/1/24)
99080	Special reports/forms (FMLA, referral forms, PT forms, school forms)***	\$125
Med Records	Copy of medical records, per page, mailed or faxed	\$0.65/page
Shipping fee	Cost to have records mailed to patient or provider	\$10
MMP initial	CT Medical Cannabis Program, Initial fee***	\$200
MMP renewal	CT Medical Cannabis Program, annual renewal fee***	\$150
New patient fee	One-time fee, new patients, admin fee***	\$85
Reactivation fee	Fee for patient not seen >12 months but < 36 months***	\$70
Late payment	Late payment fee > 30 days from visit	15%
No-Show Fee	No call, no show to appointment	Cost of visit (full cost)
Late cancellation	Cancellation <48 hours notice	\$250

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 $<sup>^{**}</sup>$  If problem-focused discussion with this service, there will be an additional 99213/4/5 code added

<sup>\*\*\*</sup> These fees are separate from, and in addition to, time-based visit fee. For forms and referrals not completed on day of visit, these will be billed at 99080 rates.



## Please note:

- Fee schedules are the same for both in-person and telehealth visits.
- •Those who have insurance with which we are out-of-network, payment is due at the time of service. Time of service discounts are applied to these payments. Once your bill has been submitted to insurance, we are unable to offer the discount and you will be responsible for the full fee.

  Patients are responsible for the cost of non-covered services.
- We are unable to schedule appointments for patients with a back-balance until your balance is paid.
- It is unlawful for our practice to waive copays, deductibles and coinsurance. If you have questions about your responsibilities with your policy, we recommend calling your insurance ahead of your visits to clarify. We are unable to adjust invoices once you've had your visit.
- Any fees prior to 8/1/24 will be billed according to our current fee schedule, which is noted in patient consent forms.
- As of 8/1/24, all patients will have to sign consents PRIOR to their visit and have a Card on file to be billed or visits will be rescheduled.
- For patients with policies other than our in-network insurances, your card on file will be billed the day of service. It is required to have a valid billing card on file all times, if your card is rejected at the time of billing we will contact you for an alternative payment source. Once your payment is made, we will submit your paid invoice to any of the insurance companies in our out-of-network list. Any reimbursement from those insurance companies will be paid directly to you. As we are opted out of Medicare, no attempt will be made for reimbursement from Medicare or Medicare-based plans. For all copays and deductibles, we will charge your card for this when we receive the amount due from your insurance company, or on the day of service for known deductibles.

If we are unable to reach you within 48 hours the time of service discount will be lost and full fee will be required.