

Miller Family Health
212 E. Foothill Blvd. Ste. C Arcadia

Disclosure of Fees - Nutrition

97802	Initial Nutritional Evaluation	\$75.00- \$125.00
97803	Follow Up/ Nutritional Counseling	\$50.00-\$75.00
A9153	Customized Liquid Formulas	\$0.22-0.54/oz
A9153	Supplements (Variety)	\$8.50 and up
82108	Metals Toxicity Urine Test	\$20.00
84560	PH (Urine Acid) Test	\$10.00
	Lab Testing	\$7.00 and up

I have read the above codes and fees and understand the cost of my Nutritional care. Payment is due at the time of service. I understand that there may be little or no coverage by my Medical Insurance and I am 100% responsible for any and all charges. **Effective September 1, 2018, there will be a \$35 charge for "no shows" and for cancellations made less than 24 hours in advance.**

I have read and fully understand the financial policies and prices

Signed _____ Date _____