



Pricing Disclosure

Codes	Short Description	<u>Insurance Price</u>
	Adjustments	
98940	CMT 1-2 Regions	\$75
98941	CMT 3-4 Regions	\$97
98942	CMT 5 Regions	\$120
98943	CMT- Extra Spinal	\$70
	Physical Therapies	
97012	Intersegmental Traction	\$65
G0283	Electrical Muscle Stimulation	\$62
97026	Infrared Therapy	\$55
97010	Cryotherapy/ Thermotherapy	\$55
	Manual Therapy	
97140	Myofascial Release	\$55/ Per unit
97110	Therapeutic Procedures	\$95/ Per unit
	New Patient Exams	
99202	New Patient Limited Exam	\$220
99203	New Patient Detailed Exam	\$315
	Established Patient Re-exams	
99211	Established Patient Brief Re-exam	\$105
99212	Established Patient Limited Re-exam	\$160
99213	Established Patient Expanded Re-exam	\$210
99214	Established Patient Detailed Re-exam	\$310
	Xrays	
X-rays		\$19-\$394
	Massage Cancellation	
Cancel Fee	Massage Cancellation Fee (within 24 hours)	\$50

As a member of ChiroHealthUSA,
BILAN CHIROPRACTIC

MARK BILAN, DC / KURT ADAMS, DC / DARYL CHALIFOUR, DC / MARK KUFEL, DC
 offers a **5 %** minimum discount off all clinic professional
 services with the following capped fees:

NEW PATIENT VISIT

5 % reduction of normal clinic fees
 with a maximum fee of **\$ 400**

This visit is defined to include/exclude:

Includes all first day services.

ROUTINE OFFICE VISIT

5 % reduction of normal clinic fees
 with a maximum fee of **\$ 97**

This visit is defined to include/exclude:

Includes: 3-4 Reg CMT (98941) plus 1-3 therapies.

**Visit to include 1-2 Reg CMT (98940)
 plus 1-3 therapies: \$75**

The following rates listed are the ChiroHealthUSA rates for each service. Any service not listed will default to the minimum of **5 %** off.
 (For patients with partial coverage, limited services, or when services are rendered in addition to routine office visit.)

CODE	CODE DESCRIPTION	ACTUAL FEE	CHUSA FEE	DISCOUNT
98940	Chiropractic Adjustment 1-2 Regions	\$75.00	\$55.00	27%
98941	Chiropractic Adjustment 3-4 Regions	\$97.00	\$77.00	21%
98943	Chiropractic Adjustment, Extra Spinal	\$70.00	\$35.00	50%
99201	NP Focused Exam	\$175.00	\$88.00	50%
99202	NP Expanded Exam	\$220.00	\$110.00	50%
99203	NP Detailed Exam	\$315.00	\$158.00	50%
99211	EP Brief Exam	\$105.00	\$53.00	50%
99212	EP Focused Exam	\$160.00	\$80.00	50%
99213	EP Expanded Exam	\$210.00	\$105.00	50%
97012	Traction Intersegmental	\$65.00	\$20.00	69%
97014	Electric Muscle Stimulation	\$62.00	\$20.00	68%
97010	Thermotherapy/Cryotherapy	\$55.00	\$20.00	64%
97110	Therapeutic Exercise, per unit	\$95.00	\$45.00	53%
97140	Myofascial Release, per unit	\$55.00	\$25.00	55%
	X-rays, per view	Varies	\$25.00	

20% off on durable medical goods
 (TENS, Eqpt, Rehab Materials, etc.)

20% off stock orthotics, pillows,
 supports, soft goods, etc.

20% off CUSTOM orthotics, supports
 soft goods, etc.

20% off Nutritional supplements
 or products

***DISCOUNTS AND CAPPED FEES EXCLUDE:**

99214