

# INTEGRATIVE HEALTH CENTER

CHARLIE SAVOCA, L.Ac.

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3121 Park Avenue, Suite H Soquel, CA 95073

(831)479-3760

## 1. CANCELLATION POLICY

I would like to thank you for being **on time** for your appointments. It is important to me and my other patients that you are here for your scheduled time. I will do my best to see you at our appointed time. If you must cancel your appointment, please call me ASAP so that I may make that time available for another client. Failure to provide a 24-hr cancellation notice may result in a \$35.00 fee for the first time. Thereafter, you may be responsible for the full office visit fee. (I may waive this for extraordinary circumstances). This helps to insure that your missed appointment does not prevent someone else from taking that slot.

## 2. INSURANCE BILLING AND PAYMENTS

As a courtesy to my patients, my office can bill your insurance company to make your visits affordable and provide continuity for your health care. I am a preferred provider for many health insurance networks which means I will accept their gee schedule and honor the appropriate co-payment. Once we have determined that your insurance covers my service, you will only have to pay the copayment as long as you have signed an assignment of benefits form. Remember that your deductible may need to be met at the beginning of each insurance calendar year. If we have not determined your benefits in advance, I may require full payment at the time services are rendered. Thank you.

## 3. FEES

Initial Office Visit \$100-\$175 depending on time spent  
Acupuncture \$65-\$75 (depending upon the complexity and time spent)  
AllergiCare Nano SRT (Stress Reduction Therapy)  
    Initial Evaluation \$79 (in addition to treatment)  
    Regular Treatment Sessions \$85  
Pre-payment discounts for Nano: 10 sessions for \$729

## 4. SPECIAL SERVICES, LABS & INTERPRETATION(S)

I offer to my patient's special services which may not be covered by insurance, such as Nutritional Response Therapy and specialized lab testing in the area of functional medicine. Because of the time involved in interpretation and consultation, there may be additional office visit charges incurred at the rate of \$37.50 per quarter hour. Please ask if you have any questions.

I have read, understand and accept these policies.

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Your Signature

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Date