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PAYMENT PLANS

Dear Patients:

To better assist you with the financial aspect of treatment, we offer two payment plans.

PLAN A: This is our **CASH** plan. Payment in full is expected at the time of your visit. If you have insurance and wish to pay cash we will provide you with a statement that you can submit to your insurance company.

PLAN B: This is our **INSURANCE** plan. Payment for your deductibles and any co-payments are expected at the time of each visit. We will bill your insurance company and wait a reasonable amount of time to receive payment. Most insurance companies do not reimburse the entire amount of each office visit. **You will be responsible for any amounts not covered.**

A SERVICE CHARGE OF 10% WILL BE ADDED TO YOUR ACCOUNT IF PAYMENT IS NOT RECEIVED WITHIN 30 DAYS OF NOTICE.

I would like PLAN: _____

Name (please print): _____

Signature: _____

Date: _____

Witness: _____

Date: _____