



**Sunlight Natural Health**  
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## Fee Schedule

To schedule your first appointment deposit as well as the following forms are required.

- ✓ **Informed Consent for Naturopathy /Homeopathy Consultation**
- ✓ **Phone and Email Consultation Policies**
- ✓ **Wellness Package Contract & auto billing authorization (if applicable)**

**Non-refundable deposit for the Time of Service patient is \$200 and \$75 for the Wellness Package Patient.**

All other Health History forms including *Personal Information, Diet Diary, & Metabolic Assessment Form* are strongly preferred prior to your first appointment but not necessarily due at time of scheduling. If you bring in your forms at the time of your appointment, time will be taken away from your scheduled appointment time to review your information.

### **New Patient Office Visit (2 hours)**

**Time of Service Patient = \$400      Wellness Package Patient = \$215**

The goal of this visit is to review your entire health history and determine any necessary further work-up. If additional time is required to complete patient intake, a continuation visit will be scheduled and billed at "Extended Visit" rate of \$100 per ½ hour for TOS patient and \$88.50 for WP Patient.

### **Review of Findings Visit (scheduled 2 hours) =**

**Time of Service Patient = \$400      Wellness Package Patient = \$215**

The goal of this visit is to review your detailed treatment plan, including a Blood Nutrition Report (BNR). If additional time is required to complete a Review of Findings, a continuation visit will be scheduled and will be billed at "Extended Visit" rate of \$100 per ½ hour for TOS patient and \$88.50 for WP Patient.

### **Follow-up Visit (scheduled 50 minutes) =**

**Time of Service Patient @ \$200/hr      Wellness Package Patient = \$107.50**

To better facilitate health and wellness, each new patient is recommended to complete 11 appointments per year, which includes 1 new patient visit, 1 review of findings visit, and 9 follow up visits. The recommended interval for follow-up appointments is an estimate based on the assessment at your last appointment and the expectation that you are doing well. If your condition changes or does not improve, if there are new lab results, if there needs to be a change to your protocol, or if there is a new health concern including acute illness such as coughs/colds and other infections, please call to schedule an appointment prior to your regularly scheduled follow-up appointment.

### **Family Plan**

A number of hours you choose to purchase for the year which will most adequately cover your family's healthcare needs. Your monthly fee is determined by the number of hours you choose for the year. Family Plan patients pay the same Wellness Package appointment fees listed above.

|                             | Family Plan | Family Plan | Family Plan | Family Plan | Family Plan  |
|-----------------------------|-------------|-------------|-------------|-------------|--------------|
| # of visits/year            | variable    | variable    | variable    | variable    | variable     |
| # of total patient hrs/yr   | <b>20</b>   | <b>30</b>   | <b>40</b>   | <b>50</b>   | <b>60</b>    |
| Cost /hr                    | \$ 177.00   | \$ 177.00   | \$ 177.00   | \$ 177.00   | \$ 177.00    |
| Total yearly fee commitment | \$ 3,540.00 | \$ 5,310.00 | \$ 7,080.00 | \$ 8,850.00 | \$ 10,620.00 |

updated 09/28/2015

|                               |             |             |             |             |             |
|-------------------------------|-------------|-------------|-------------|-------------|-------------|
| Monthly fee                   | \$ 115.83   | \$ 173.75   | \$ 231.67   | \$ 289.58   | \$ 347.50   |
| Yearly min. commitment        | \$ 1,390.00 | \$ 2,085.00 | \$ 2,780.00 | \$ 3,475.00 | \$ 4,170.00 |
| Total cost of @ visit charges | \$ 2,150.00 | \$ 3,225.00 | \$ 4,300.00 | \$ 5,375.00 | \$ 6,450.00 |
| NP fee (due @ vist)           | \$ 215.00   | \$ 215.00   | \$ 215.00   | \$ 215.00   | \$ 215.00   |
| ROF fee (due @ visit)         | \$ 215.00   | \$ 215.00   | \$ 215.00   | \$ 215.00   | \$ 215.00   |
| FU fee (due @ visit)          | \$ 107.50   | \$ 107.50   | \$ 107.50   | \$ 107.50   | \$ 107.50   |

**Phone Consultation (length varies) = pro-rated for \$200/hr**

Scheduled phone consultations are available for established patients. Phone consultations are charged at the regular hourly rate, like face-to-face appointments. This allows each patient some scheduling flexibility.

**Cancellation Policy**

For any visits canceled with less than **two open business days** notice, the patient will be charged the full visit fee except in the case of family or medical emergency. Late arrivals will not receive an extension of scheduled service times and will be responsible for full service fee.

**Product Returns**

Returns are accepted for unopened supplements within their expiration date for 90 days from purchase except for probiotics, fish oil and homeopathic remedies. A restocking fee of 10% will be assessed for returns after 30 days.