

HormoneRestoration.com

Henry Lindner, MD

# Contract and Fees

Dr. Lindner does not provide any primary, urgent, or emergent medical care. All patients must retain their own primary care provider. For any significant after-hours medical problems, patients must contact their primary care doctor or go to an emergency room. Dr. Lindner is available by phone only during business hours on M-TuesAM-W-F.

An in-office consultation is required at least once every six months to renew prescription hormone therapy, except in unusual circumstances. A phone or office consult is required to renew prescriptions, so patients should call our office for a follow-up appointment after obtaining their last refill. There is a small charge for late refills prior to an appointment.

Basic Fee: \$5 per minute for consultation and documentation time

### Office Consultations

20 minutes or less, minimum charge	\$100
30 minutes	\$150
45 minutes	\$225
1 hour	\$300

### Phone Consultations (The time charged includes post-call documentation.)

10 minutes or less, minimum charge	\$50
>10 minutes charged at \$5/min, same cost as for office consultations	

### E-mail Consultations (info. or advice not requiring other action)

Requiring a new prescription or laboratory test request	Free
Requiring two or more prescriptions and/or lab requests	\$20
	\$30-\$40

### Refills and Laboratory Requests (handled by clinic staff)

	\$10
(Charges for e-mail consultations and for requests handled by clinic staff are added to the patient's account, to be paid at next consultation.)	

### Formal Letters and Reports

\$100

Fees are subject to change without notice. The above fee schedule does not include costs for lab tests, hormones, or supplements. Dr. Lindner does not bill insurance and does not participate in Medicare, Medicaid, or any insurance plans. Patients may submit paid invoices to their medical insurance, but not all will reimburse for services provided by a non-participating physician. Lab tests and hormones may be covered by insurance if a recognized diagnosis exists as per ICD-9 and the insurer agrees that the test or prescription is necessary for the given diagnosis. Dr. Lindner will not submit insurance exemption requests for denied prescriptions, lab tests, or office visits.

I understand that I am responsible for Dr. Lindner's fees. I am responsible for determining whether labwork will be covered by my insurance before undergoing testing ordered by Dr. Lindner.

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Signed

Date