Archangel Michael Health

Financial Agreement & Payment Policies

Christopher L. Bray, MD, PhD, CPE, FACP — board-certified in Internal and Integrative Medicine

Version v2026.07.02 · Effective June 10, 2026

This document states the financial terms for all care provided by Archangel Michael Health, PA (the "Practice"). It is incorporated by reference into, and should be read together with, the *Direct Primary Care Service Agreement* (version v2026.07.02).

1. Out-of-Network / Self-Pay Status & Patient Responsibility

Archangel Michael Health, PA does not participate with any commercial insurance plan, Medicare, or Medicaid. All services are provided on a **self-pay** basis, and the Practice **files no claims with any insurer** — commercial, Medicare, Medicaid, or otherwise. Patients are responsible for all charges incurred for services provided by the Practice.

2. Medicare and Medicaid

Medicare opt-out. Dr. Bray formally **opted out of Medicare in early 2025**. Under federal law (MACRA), the opt-out automatically renews every two years unless cancelled.

Medicare beneficiaries are welcome. If you are a Medicare beneficiary, you may become a member or a one-time patient of the Practice. However, federal law (42 C.F.R. § 405.415) requires that you sign the Practice's separate *Medicare Private Contract* **before** any service is provided. Under that contract:

- No claim will be submitted to Medicare for any service the Practice furnishes you, and **Medicare will not pay or reimburse any amount** for those services;
- **Medigap (Medicare supplement) plans will not pay** for those services either;
- You agree to pay the Practice's charges out of your own funds, at the same prices as every other patient.

What is not affected by the opt-out:

- **Prescriptions** written by Dr. Bray remain eligible for Medicare **Part D** coverage at your pharmacy;
- **Outside laboratories, imaging centers, and specialists** you see independently may still bill Medicare normally — the opt-out applies only to services furnished by this Practice.

Medicaid. The Practice does not participate in Medicaid.

3. Payment Methods and Payment Timing

Payment for all services is processed securely via **Stripe**, accepting major credit and debit cards. Payment can be initiated through links provided on the Archangel Michael Health website or via secure payment links sent directly to you by email, SMS, or portal message.

Privacy of payment data: Stripe receives billing and payment details only — never medical information — and your clinical records are kept entirely separate from the payment system.

For One-Time Consultations (Non-Members)

Full payment for the selected service (e.g., 30-minute visit, 60-minute visit, record review) is required **in advance**. Payment must be successfully processed before Dr. Bray undertakes any preliminary record review and prior to the scheduled consultation time. One-time visit services will not be rendered until payment confirmation is received.

For Direct Primary Care (DPC) Monthly Subscriptions

- **New members:** There is **no enrollment or initiation fee**. To initiate membership, you must first complete all required intake paperwork. Your first monthly subscription fee must then be paid and current before Dr. Bray performs the initial comprehensive record review and completes your official registration into the practice, and before your initial membership visit can be scheduled or any direct physician communication (text, email, portal message) associated with ongoing care can occur.
- **Ongoing membership:** Your subscription fee is processed automatically via Stripe on a recurring monthly basis. Maintaining a current, paid subscription is required to schedule and attend appointments (telehealth or house-call visits) and to engage in direct physician communication (secure text, email, patient portal messaging) included in the DPC model.
- **Lapsed payments:** If your recurring monthly subscription payment fails or is not kept current, scheduled appointments may be canceled or rescheduled, and access to direct physician communication channels will be suspended until the subscription is brought back into good standing with payment confirmation via Stripe.

Access to Medical Records

Your right to access your personal medical records is protected. Access to view or obtain copies of your existing medical records — through the patient portal or via formal request — remains available **regardless of your subscription or payment status**. Records access is never withheld for non-payment.

4. Membership Fee Schedule

Membership is not a requirement to receive care (see Section 5, Non-Member Fees).

Enrollment Fee

None — there is no enrollment or initiation fee to join.

Membership Included Services

- Unlimited telehealth visits
- Email, text, and phone support and physician communication
- Record review, diagnosing, advising, ordering & interpretation of tests (including labs, imaging, referrals), prescribing, and treatment
- House-call visits in Alachua County, Florida, when medically appropriate
- Internal medicine and integrative medicine approaches based on patient preference
- Coordination of care with specialists (referrals, as needed)
- Written summary of visit and specific recommendations

Membership Monthly Tiers

MEMBERSHIP CATEGORY	MONTHLY FEE
Children (<18 y/o)	$35/month
College Students (Full-Time)	$55/month
Adults (18–49 y/o)	$75/month
Older Adults (50–64 y/o)	$90/month
Geriatric Adults (65+ y/o)	$125/month
Couples (both <65 y/o)	$150/month total
Couples (one or both 65+ y/o)	$170/month total
Family Plan (2 adults <65 y/o and 1 child)	$175/month total
Family Plan (2 adults <65 y/o and 2 children)	$200/month total (each additional child: $15/month)
Business/Employee Rates	$70/month
Functional Medicine Membership **(not currently offered)**	$175/month

Membership Prepayment Discounts

- **Annual prepayment:** 10% off the total if paid in full at the start of the annual cycle.
- **Two-year prepayment:** 15% off the total if paid in full at the start of the two-year cycle.

Membership Cancellation and Reinstatement Fees

ITEM	FEE
Membership cancellation fee	$0
Membership reinstatement fee (individual or family) — charged to re-activate a membership after it lapses for non-payment or is terminated	$150

> **HSA note:** Under the federal change effective 2026, DPC membership fees are HSA-eligible up to $150/month for an individual and $300/month for a family. Consult your tax advisor about your specific situation.

5. Non-Member / One-Time Visit Fees

SERVICE	FEE	INCLUDES
One-Time Short 30-Minute Visit	$80 per visit	Up to 15 minutes of pre-visit record review + 30-minute telehealth consultation. Ideal for straightforward concerns or a single issue. Includes a written summary of visit and specific recommendations.
One-Time Comprehensive 60-Minute Visit	$150 per visit	Up to 30 minutes of record review + 60-minute telehealth consultation. Best for complex cases or a thorough integrative medicine discussion. Includes a written summary of visit and specific recommendations.
Additional Record Review / Consult	$60 flat fee per additional 30 minutes	Extra record review beyond what is included with a visit.

6. Refund / Cancellation Policy (One-Time Visits)

We understand that unexpected events can occur. At this time, we do not charge any cancellation or no-show fees for one-time visits. However, we kindly request that you notify us as soon as possible if you need to cancel or reschedule, so we can offer your time slot to another patient in need.

7. Termination and Refund Terms

Consistent with the *Direct Primary Care Service Agreement*: either party may terminate the membership agreement with a minimum of **30 days' written notice** (secure portal message, email, or certified mail). Membership fees or prepaid non-member service fees will be refunded on a **pro-rata** basis for any services not rendered beyond the effective termination date — including if the Practice ceases to offer services for any reason.

No term contract; no cancellation fee. Membership is month-to-month — there is no 3-month, 6-month, or 1-year contract or commitment — and there is never a fee to cancel. The optional annual and two-year *prepayments* are discounts, not contracts: unused months are refunded pro-rata if you

cancel. **How to cancel your subscription:** (1) manage or cancel the recurring payment yourself in the secure **Stripe billing portal** — use the subscription-management link on our website or in your Stripe receipt emails, or ask us to send it to you; or (2) send written notice by secure portal message, email, or mail. Cancelling your recurring payment in Stripe is accepted as your notice of termination, and we will confirm every cancellation in writing.

ACKNOWLEDGMENT

☐ I have read and I acknowledge these financial policies (Sections 1–7, v2026.07.02).

☐ I have read but do not agree to these financial policies.

PATIENT NAME (PRINT) _____ DATE OF BIRTH _____

PATIENT SIGNATURE _____ DATE _____

LEGAL REPRESENTATIVE / PARENT / GUARDIAN SIGNATURE (IF APPLICABLE) _____ RELATIONSHIP TO PATIENT _____

For office use only · Received by (staff): _____ Date received: _____

Archangel Michael Health, PA · 352-441-9110 · fax 352-441-9114 · archangelmichaelhealth.com