

Dear _____,

At _____, we are committed to providing you with the highest quality therapy services to support your well-being and recovery journey. As part of our ongoing efforts to maintain the quality of our services and to keep pace with rising operational costs, we periodically review our fee structure.

After careful consideration, we have made the decision to adjust therapist rates effective _____. This adjustment reflects our dedication and expertise, as well as the investments we continue to make in training, technology, and resources to enhance your therapy experience.

We understand that any change in fees may raise questions or concerns. Please be assured that we remain committed to transparency and are available to discuss any questions or address any concerns you may have regarding this adjustment. We deeply value the trust you place in us as your healthcare provider, and we are committed to delivering exceptional care that meets your needs and exceeds your expectations.

Below is a comparison table illustrating the new therapist rates alongside the previous rates:

Therapy Service	Previous Rate	New Rate

Thank you for your continued trust and support. We look forward to continuing to serve you and to assisting you on your journey to optimal health and wellness.

If you have any questions or concerns, please do not hesitate to contact us at _____.

We are here to assist you in any way we can.

Warm regards,

