

The Cash-Pay Bridge

A webinar registration page and post-webinar email for a coach who helps physical therapists

The offer: A free 60-minute live training, leading to The Cash-Pay Bridge, an 8-week group program.

The reader: US physical therapists who still love treating patients but are worn out by caseloads and charting.

The goal: Registrations for the webinar, then enrollments after it.

Spec piece. Names, numbers and testimonials are illustrative. The webinar date, replay time stamp and enrollment deadline are sample values; they and the other details to confirm are listed in the Notes for the client at the end.

Webinar registration page

The Cash-Pay Bridge · Free training

Free live training for physical therapists

Start your cash-pay practice on the side, without quitting your clinic job first

A free 60-minute training for PTs who still love treating patients but are worn out by the pace. You'll leave with a plan to see your first paying patients on evenings or weekends, while your paycheck keeps coming in.

Thursday, November 5 · 8pm Eastern · Live on Zoom, with a replay for everyone who registers

Save my free seat

You became a PT to help people, not to chart through dinner

Your day is booked almost back to back. Between patients there's just enough time to finish a note, grab some water and call the next name.

The notes you couldn't finish get done at lunch or after the last patient leaves, and some nights they come home with you.

None of that means you chose the wrong career. It means the way most clinics get paid leaves them little choice.

Medicare's base payment rate is still about 7% lower than it was in 2016, while costs have kept rising, so clinics make up the difference with more patients per hour. And you're the one who absorbs it.

Why so many PTs dream of cash-pay and never start

Most think it means quitting first: handing in their notice, signing a lease and hoping patients show up before the savings run out. With rent and loans to pay, that feels like jumping without a net, so the dream waits another year.

There's a calmer way in. You keep your job and build a small cash-pay caseload on the side, a few patients at a time, until it's steady enough to stand on.

That's the Bridge Method, and it's what this training walks you through.

In 60 minutes, you'll learn

- The 3 questions to ask before you see a single cash-pay patient (skip one, and your employment contract could stop you cold).
- How to price your first sessions so they pay for your time and still feel fair to patients, even in a town full of in-network clinics.
- Where your first five patients usually come from (hint: you already know most of them).
- The weekly schedule that lets you treat on the side without burning out twice as fast.

This training is for you if...

You're a licensed PT in the US, you still enjoy treating patients but not the pace, and you'd rather test cash-pay than bet everything on it.

It isn't for you if you want a way to get rich quickly. This is a careful, step-by-step way to build something of your own.

Your host

Image: photo of Maya

Dr. Maya Ortiz, PT, DPT, spent eight years in outpatient orthopedics. She built her cash-pay practice on evenings and Saturdays for 14 months before she left her clinic job.

Now she helps other PTs do the same, without the leap of faith.

[Save my free seat](#)

P.S. Can't make Thursday at 8pm? Register anyway.

Everyone who signs up gets the replay, so you can watch it after your last note is done.

Post-webinar email

Sent the morning after, to everyone who registered

Subject (option A): Your replay, plus the part to rewatch first

Subject (option B): Last night's training (and what's next)

Preview: The three questions that protect your clinic job

From: Maya Ortiz

Hi [first name],

Thank you for joining me last night. If you missed it, or got pulled away halfway through (I know how evenings go after a full caseload), your replay is ready:

[Watch the replay](#)

If you only rewatch one part, make it the three questions to ask before your first cash-pay patient. It starts about 22 minutes in, and it could save you from a contract problem you didn't know you had.

At the end of the training, I opened the doors to The Cash-Pay Bridge, my 8-week program where we build your side practice together.

Each week you get one live call with me, one clear step to finish, and feedback on your pricing and your first patient conversations. By week eight, the goal is a cash-pay service you're ready to offer, with your first patients booked or on the way.

Enrollment closes Sunday at midnight Eastern. The first live call is on Monday, and I keep each group small enough to answer every question.

Everything's on the enrollment page, including the price and what each week covers.

[Join The Cash-Pay Bridge](#)

Not sure it's right for you yet? Just reply and tell me where you're stuck.

I read every reply myself.

Talk soon,

Maya

P.S. You don't have to quit anything to start. You keep your job and your paycheck while you build, and that's the whole point of the bridge.

Notes for the client

- Sample values to replace: the webinar date (Thursday, November 5, 8pm Eastern), the replay time stamp (about 22 minutes in) and the enrollment deadline (Sunday at midnight Eastern). The deadline must really close enrollment.
- Maya's story: eight years in outpatient orthopedics, 14 months building on the side, and her doctorate must match her real history.
- Group size: the email promises small groups. Please confirm the real cap.
- Price and guarantee: the email points to the enrollment page for the price. Add the guarantee there too, if there is one.
- Medicare figure: the conversion factor was \$35.80 in 2016 and is \$33.40 in 2026 (CY2026 final rule, standard rate), about 7% lower. Recheck it each January.
- The training must deliver what the page promises: the three questions, the pricing method, where first patients come from and the weekly schedule.
- Contracts and licensing: the training touches on employment contracts. Suggest Maya tells attendees to check their contract and state rules with a lawyer, since she can't give legal advice.