

# *Sentara Martha Jefferson Medical Group*

## **Financial Policy**

Sentara Martha Jefferson Medical Group (SMJMG) is committed to providing each patient with the best possible medical care. The following information is provided to avoid any misunderstanding concerning payment for the professional services rendered by our practice.

\* Please note returned checks are subject to a \$50.00 fee.

### **Insured Patients:**

- Any required co-payments will be collected at the time of service.
- Upon receipt of a statement from our billing office, you will be responsible to pay any billed amounts unless other arrangements have been made.
- If your insurance plan determines a service not to be covered, we may bill you for that charge.
- If we do not have a contract with your insurance carrier, we will bill your insurance plan on your behalf.

You authorize us, our successors or assigns, to call you or contact you via electronic communication at any number you provide or at any number at which we reasonably believe we can contact you, including calls to mobile, cellular, or similar devices, and including calls using automatic telephone dialing systems and/or prerecorded messages, for any lawful purpose, including but not limited to: (1) suspected fraud or identity theft; (2) obtaining information necessary or desirable; (3) your account transactions or servicing; and (4) collecting on your account. Numbers you provide include numbers you give us and/or numbers from which you call us, our successors or assigns.

Thank you for the opportunity to serve you. If you have questions regarding this information, please do not hesitate to ask. We are here to assist in any way we can.



