

Nonnie M. Estella MD, PC
295 Varnum Avenue
Lowell, MA 01854
978-459-8300
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Financial Policy

Thank you for choosing our office as your OB/GYN provider. We are committed to providing patients with the best treatment possible. Payment for services rendered is part of that treatment. Our financial policy is as follows:

- Full payment is due and payable at the time of service unless other arrangements have been approved by our office manager
- We accept cash, check, Visa or MasterCard payments
- We offer a confidential payment plan that requires a signed patient agreement

We accept assignment of insurance benefits; however, we cannot bill your insurance company without the proper insurance and/or referral information. If you require a referral for services, you must supply us with that referral at the time of service. It is your responsibility to know what your insurance company requires, to provide us with that information, and to inform us if you change from one insurance company to another prior to treatment.

Co-pays, co-insurance deductibles and billable non-covered services are your responsibility.

Our office charges what is usual and customary for your geographic location. You are responsible for payment regardless of any arbitrary determination by your insurance company as to what is usual and customary, unless we are a participating provider. By participating we have mutually agreed with certain insurance carriers to accept their approved amounts.

I understand that I am personally responsible for all deductibles and any charges denied by my insurance. I will pay my patient balance within 30 days of receipt of statement from Nonnie M. Estella MD, P.C. unless arrangements are made with the billing office.

If you have any questions, please ask our office manager Haydee Cruz.

I have read the above information and agree to these policies.

Patient Signature

Date

Print patient name