

Dr. Sagar y. Patel, M.D LLC  
100 Commons Way Suite 260  
Holmdel, NJ 07733

**Financial Policy Statement**

To help our patient fully understand our billing process we ask that you read and sign our financial policy statement.

As a courtesy to you, Dr. Sagar Y. Patel, MD LLC will submit the copy to your insurance carrier depending upon your individual policy, your coverage, your deductible and/or your co-payment requirements, for which you may be, billed the balance.

All though we participate with the most carriers, it is your responsibility at the time of service to verify with your insurance carrier if the particular physician you are seeing is registered as a participating physician with your plan.

For claims not submitted, as courtesy or insurance plans that do not allow such submissions, Dr. Sagar Y. Patel, M.D, LLC accepts cash, checks and credit cards for payments, which is due at the time of service.

When our doctor participates fully in your insurance plan, you are still responsible for paying any co-insurance, deductible or co-payment(s) as indicated by your carrier as well as any non-converted service(s) under their contract.

You are responsible for bringing the necessary referral(s) to the office on the day of your appointment. If you do not have the required referral form(s) on the day of the appointment, you are responsible for payment at the time of service.

Although Dr. Sagar Y. Patel, MD, LLC may on occasion, as courtesy to you file private insurance claims, we will not become involved in disputes between you and your insurance carrier regarding covered charges, secondary insurance issues or “usual and customary” charges, Other than, supply factual information as requested by the insurance carrier.

Thank you for taking the time to review the financial policy statement. Please let us know if you have any questions, comments or special concerns.

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Signature of Responsible Party

Date