



Medical Clinic of Houston, L.L.P.

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ENDOSCOPY PROCEDURES: Patient Financial Responsibility and Disclosures

Thank you for scheduling your endoscopy procedure with Medical Clinic of Houston LLP. Please note the following important information regarding your procedure.

We will only bill and collect fees for the services performed by your physician at Medical Clinic of Houston LLP (Dr. Wolf, Dr. Zafar, and Dr. Dugan). Any charges and fees for the endoscopy facility (surgical center), anesthesia, laboratory and pathology (if specimens are obtained) are separate, and NOT a part of our fees. Your physician may have an ownership interest in one or more of these ancillary facilities. You have the right to choose the provider for your health care services. Please inform us before your procedure if you would like a particular company or facility (based on your insurance plan) to be used for any of these services.

A financial counselor will verify the benefits with your insurance company for your scheduled procedures. If we have a contract with your health insurance plan, we have agreed to file your insurance claim on your behalf and collect your out-of-pocket expenses, limited to deductible, co-insurance and co-pay based on the rate contracted by Medical Clinic of Houston LLP with your health insurance plan. The amount provided to you is an ESTIMATE of your out-of-pocket expenses and financial responsibility. The estimated out-of-pocket amount must be paid to Medical Clinic of Houston LLP prior to your procedures. Once your insurance company has completed processing your claim, your expenses could be more or less than originally estimated.

You are responsible for updating your insurance information before your procedures. If there is no insurance information available, you will be expected to pay the full in full prior to the procedures at a self-pay price. You have the right to receive a "good faith estimate" explaining how much your medical care will cost.

Referrals / Authorizations: If your insurance plan requires a referral or pre-authorization, you are responsible for obtaining it prior to the procedure being performed. Please be advised that if you elect to be seen without a referral / authorization, or you have changed primary care providers without obtaining a new referral / authorization, or your referral / authorization has expired, you will be responsible for payment of our full charges.

Major credit cards are accepted over the phone and at the office. Cash and check payments can be made at the office. For larger balances, extended payment plans or other payment options may be available. Please contact an Account Representative at Medical Clinic of Houston LLP by calling 713-526-5511, extension 4739.

Sincerely,

David S. Wolf M.D., M. Behzad Zafar M.D., and John T. Dugan III M.D.