



Anointed Health Partners, Ltd.

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Insurance Billing Policy

Dear Patient,

Thank you for selecting our practice for your medical needs. We value our relationship with you. Please read the following information about our office billing policies and sign at the bottom.

As a courtesy to our patients, we will submit claims to your insurance company for payment of services received by you. Patients are responsible for knowing their insurance benefits, such as deductibles, co-pays, co-insurance, maximum number of visits allowed and services not covered by your insurance plan. Contact your insurance carrier or employer for this information.

You are responsible for any charges not covered by your insurance company. We make every effort to work with your insurance company to secure payment for services they cover.

Please be sure to notify us of any changes in your health insurance coverage, including co-pays or new insurance card ID numbers.

I have read these policies and agree to comply with them to the best of my ability.

Name (please print)

Date

Signature