



Lentz Pediatrics

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Jonathan D. Lentz M.D.

FINANCIAL POLICY

We are committed to providing you with the best possible care. If you have medical insurance, we are anxious to help you receive your maximum allowable benefits. In order to achieve these goals we need your assistance and your understanding of our payment policies.

Payment for office visits is due at the time services are rendered (before being seen by the provider), unless payment arrangements have been approved in advance by our office. We accept cash, and most major credit cards.

Co-payments are required when you sign in at the front desk prior to being seen by the provider. It is considered insurance fraud and illegal for us to not collect co-payments. We can no longer accept “insurance only”

Balances over 30 days old may be subject to additional collection fees and interest charges.

We will gladly discuss your proposed treatment and answer any questions relating to your insurance to the best of our ability. You must realize however that:

- Every insurance company is different. Not all services are a covered benefit in all contracts. Not every insurance company will pay the same amount for any given service.
- Your insurance is a contract between you and/or your employer and the insurance company. We are not a party to that contract. You are responsible for whatever your insurance company does not pay in a timely fashion.

We must emphasize that as health care providers, our relationship is with you, not your insurance company. It is not our responsibility to make your insurance company pay the full amount of the benefits to which you are entitled. While the filing of insurance claims is a courtesy that we extend to our patients, the charges are your responsibility from the date services are rendered. We realize that temporary financial problems may affect timely payment of your account. If such problems arise, we encourage you to contact us promptly for assistance in the management of your account.

If you have any questions about the above information or any uncertainty regarding insurance coverage, please do not hesitate to ask us. We are here to help you.

Signature of Patient or Guardian