BILLING INFORMATION

You will receive TWO (2) separate statements for your procedure(s) today

1: North Shore Endoscopy Center: The Lake Bluff IL Endoscopy ASC, LLC 847-604-8700 7: OO am – 3:30 pm

FACILITY FEE:

NSEC PAYMENT POLICY:

- 1) As a courtesy to our patients verifiable and assignable insurance will be billed by the North Shore Endoscopy Center.
- 2) Payment in full is due when services are rendered on PRIVATE/SELF PAY ACCOUNTS
- 3) The North Shore Endoscopy Center accepts Visa, Mastercard, Discover and American Express for your convenience.

Online Payments can be made on our website: www.northshoreendocenter.com

- 4) A RETURNED CHECK FEE OF \$25.00 WILL BE CHARGED TO THE PATIENT'S ACCOUNT.
- 5) Accounts NINETY (90) Days Past Due AFTER your Insurance has paid shall be considered delinquent and will be assigned to a collection agency unless other arrangements have been made.

If you need to make payment arrangements or have any questions regarding your bill, please call the number above BEFORE the ninety-day period ends. We are more than willing to work with you, so you must communicate with us so we can help.

2: Lake Shore Gastroenterology IGG (The IL Gastroenterology Group)

847-244-6320

DOCTORS FEE: W. Reid Glaws - Kevin Liebovich - Jonathan Rosenberg – Amit Kalra - Jennifer Spanier-Stiasny

Anesthesia Fee: IGG (The IL Gastroenterology Group)

Pathology Fee: IGG (The IL Gastroenterology Group)

Please do not hesitate to call if you have any billing questions. Everyone involved is willing to work with you regarding the payment plans available.