

Thank you for choosing Harvard Medical Faculty Physicians for your healthcare needs.

PAGE 1 OF 2 FLIP PAGE ▶ ◆ Paying With Check? Detach and return lower portion with payment ◆ Harvard Medical Faculty Physicians Name Selfpay Hmfp Beth Israel Lahey Health **Guarantor Number** 163367 PO BOX 411990, BOSTON, MA 02241-1990 RETURN SERVICE REQUESTED \$2,501.00 Amount Due: Payment Included: \$ If paying by check, make payments to: յոլի վիրականին բանին ինկիցում կանին հանդիկի վի 123 MAIN ST յթյինիայնակինը Որիլիկիկիրինույիույիներ 412 ALBANY, NY 12204 HARVARD MEDICAL FACULTY PHYSICIANS PO BOX 411990 BOSTON, MA 02241-1990 000163367080520250002501004

PPS and AFS will be our two billing partners providing customer service support. You will receive the appropriate customer service # based on your last name.

- PPS [Last Names A-K]
 - Customer Service: 617-535-3303
 - Hours: Mon-Fri 8:00 am 5:00 pm
- AFS [Last Names L-Z]
 - Customer Service: 781-453-7300
 - Hours: Mon-Fri 8:00 am 5:00 pm

Visit 1	Patient Name: Selfpay Hmfp Location: Boston Endoscopy Center Description of Service	Account Number: 5000000159 Provider: Mark Zeidel, MD	Amount
3/31/2025	Office/Outpatient New High Mdm 60 Minutes		\$742.00
3/31/2025	Biliary Endo Prq T-Tube Dx W/Collect Spec Brush		\$1,405.00
		Insurance Payments:	\$0.00
Notes: Your insurance has been billed if applicable. The remaining balance is your responsibility.		Patient Payments:	-\$10.00
		Adjustments:	\$10.00
Insurance: Blue Cross Medicare Advantage		Total Amount:	\$2,147.00

Payment Plan	Patient Name: Selfpay Hmfp	Monthly Payment Plan Amount	\$354.00 8
		Number of Payments Remaining:	
Date	Provider Name	Account Number	Total Patient Balance
5/8/2024	Nneka O Brooks, MD	500000023	\$605.60
6/6/2024	Mark Zeidel, MD	5000000232	\$326.00
2/19/2025	Monica M Shoji, MD	500000099	\$494.00
3/4/2025	Aliza Acker-Bernstein, MD	405912	\$437.00
4/21/2025	Monica M Shoji, MD	408087	\$216.30
5/28/2025	Monica M Shoji, MD	5000000371	\$746.00
Notes: Please visit MyChart to update your Payment Plan with any additional visits.		Total Payment Plan Account Remaining I	Balance: \$2,824.90
		Overdue Payment Plan Account Amount:	\$0.00

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Billing Information & Payment Options

About Harvard Medical Faculty Physicians (HMFP)

Harvard Medical Faculty Physicians at Beth Israel Deaconess Medical Center (HMFP) is one of the largest physician organizations in New England, and is dedicated to excellence and innovation in patient care, education, and research. HMFP partners with 2,400+ providers and healthcare practitioners to support the delivery of exceptional care across the Beth Israel Lahey Health (BILH) system, and other hospitals in eastern Massachusetts.

Physician Billing

This statement represents the portion due for your physician's or healthcare practitioner's services in the department noted. You may receive additional statements for other physician or hospital-related services.

Payment Plans

(5)

HMFP offers interest free payment plans for qualifying balances. To enroll in a payment plan, visit mychart.bilh.org or call Customer Service at 617-535-3303 to speak to a representative.

MyChart Instructions

MyChart provides a simple, secure, and convenient way to pay and manage all of your healthcare expenses in one place. Within MyChart, you can view affordable payment options, schedule future payments, view transaction history, and securely message us with your billing questions. Visit mychart.bilh.org to get started.

Financial Assistance

HMFP offers financial assistance based on the Federal Poverty Guidelines.

To obtain a copy of the policy, and/or apply for financial assistance, visit us at https://hmfphysicians.org/, select patient resources, then financial assistance, or scan the QR code.



If you opt into a payment plan, a breakout of the plan will be included on your statement

- QR code on page 1 will bring you to MyChart; you can pay as a guest or log into your MyChart account
- QR code on page 2 will bring you to the BIDMC/BILH Financial Assistance site