

Advance Cost Estimate Notice

If you are an uninsured or self-pay patient, you have the right to a good faith estimate of expected charges prior to receiving services if your appointment is scheduled three (3) or more days from the date of the request. This estimate may not include tests ordered the day of your appointment.

If your appointment is scheduled three to nine (3 to 9) days from the date of a request for an appointment with us, The Polyclinic will provide a written good faith estimate of expected charges prior to the services. You should expect to receive a letter sent via first class mail or a printable estimate through your Patient Portal/My Chart connection. You may also receive a phone call from us with the advance cost estimate prior to your services. If your appointment is scheduled nine (9) or more days after the request for an appointment with us, you should expect to receive a letter sent via first class mail or a printable estimate through your Patient Portal/My Chart connection. Please update your address and verify with us that we have your most up-to-date current address.