

# Essex Oncology of North Jersey, PA

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Dear Patient:

We are pleased that you have chosen \_\_\_\_\_  
as your physician. As he/she provides the medical care you need, we,  
the members of his/her staff, will be available to help you schedule  
appointments and understand our office procedures. The following  
information concerning the financial policy of the practice is important.

If you have health insurance, please bring with you your insurance  
card(s) and the mailing address of your carrier so that we may submit  
a claim on your behalf.

If your insurance requires you to have a referral to see a specialist,  
one must be obtained from your Primary Care Physician prior to being  
seen by our physician. Please make sure you have it with you the day  
of your visit.

If your insurance requires you to pay a copayment to the physician  
that will also be due at the time of service. Please refer to our  
Financial Policy for payment options.

Thank you for your support of this policy. Please let me know if you  
have any questions.

Jennifer J Wendt  
Billing Manager