

Financial Policies

PEDIATRIC ASSOCIATES, PSC FINANCIAL POLICY

Pediatric Associates appreciates that you have chosen our office for pediatric care of your child. We work very hard to provide the very best medical care for you and your family. The financial aspects of the medical field can be complex. There are many different types of insurance contracts. It is important that you understand your insurance contract and our financial policies as well.

Newborn babies need to be added to your insurance plan within 30 days of birth to ensure coverage. We understand that it takes time to get added to the plan and receive an insurance card. We will collect applicable co-pays, co-insurance or deductible amounts without an insurance card for eight weeks after your baby is born. You should receive your card as confirmation of coverage prior to your baby's two month appointment. If you have not received this card within a week before the appointment, please call your insurance company and ask them to send the card immediately. If we do not have insurance information, your account will be treated as a self-pay account by our office and the applicable amount will be collected. If our office is not contracted with your insurance we cannot file your insurance claims. Your account will be treated as a self-pay account and you will receive a receipt with all pertinent information to submit to your insurance company for reimbursement.

We do require you to have your insurance card at every visit. Prior to being seen you will be asked to look over your child's personal information and make applicable changes. We will make a copy of your most current insurance card. This card is our way of confirming your coverage. It has all the information needed to file your claims. If you do not have a card, you will be treated as a self-pay account until the correct insurance card is received. In some occurrences your insurance company may send your card with incorrect information such as an incorrect primary care physician. We will not be able to accept this card.

If your insurance contract requires a co-pay at each visit, we will collect this co-pay before your child sees a provider. When you are finished with your visit you do not have to stop back at the front desk unless there are other issues to discuss or you have questions. If for some reason you paid the incorrect co-pay amount and we have to bill you, we will give you thirty days to send in the correct amount. If after thirty days the account is not resolved we will charge a \$5.00 monthly processing fee. If after two months this is not paid, further action will be taken.

If your insurance requires a deductible, we treat the deductible the same as we do for patients who are self pay. Many deductible plans cover well child care in full and for those plans no payment is collected at the time of service. For patients that are self-pay or

have deductibles, a payment of at least \$50 is required at the time of service. The remaining balance is due in 30 days and we will invoice you for this amount. For deductible plans we will invoice you after your insurance company responds to the claim.

For your convenience we will file your claims for you when all the correct information is received as long as our providers are contracted with your healthcare insurance. Once your claim has been filed to your insurance company, claims are usually paid in 30 days. Our office will make every attempt to collect payment from your insurance, but if all attempts fail we will rely on you to contact your insurance company to get claims paid in a timely manner. If claims get past 90 days old you may be asked to pay claim and when insurance pays you will be sent a refund. If you have questions regarding payment of your claim once it is received at our office, you will be better served by calling your insurance company with your questions, not our billing office. They will be better able to explain your benefits. Also with HIPPA regulations, insurance companies will not give much information to our office. It is your responsibility to make sure we are participating with your Insurance plan. Due to the many different plans within Insurance Companies, please call your Insurance Company to make sure we are participating in your individual plan. If we are not a participating provider for your insurance, if you are not insured, or we do not file with your insurance company, you may be responsible for the entire charge at the time of service.

All patient balances are due in full when billed. If you ever feel the amount does not reflect the amount you owe, please contact our billing office. We will be happy to review the invoice with you and answer your questions. If you have overpaid for some reason we will issue a refund. If the amount is over \$40 we will send you a check or refund your credit card automatically. If it is less than \$40 we will keep this credit on your account for you to use the next time you are in. If you ever want us to refund that amount to you, just let us know and we will get the refund to you within a week.

It is our primary goal to provide the best healthcare for your children. In order to do this, we provide a variety of services in our office. These services include labs, tests, procedures and an "After Hours Clinic" during busy times. Some of these services have additional charges associated with them. Most are recognized by insurance companies. Patients may be required to pay additional amounts for these services depending on the type of insurance plan you have and your coverage.

We are happy to help you with any billing questions. Please keep in mind there are some questions we will not be able to answer. Questions about if or why something is covered or not can only be answered by your insurance company. Feel free to call us and we will answer the questions we can and direct you to your insurance company if your question is one we cannot answer. Again, we look forward to working with you and your children!

Please see the following for billing FAQ's:

[Billing-FAQ](#)