

## **PEDIATRIC CENTER AT RENAISSANCE FINANCIAL POLICY**

Pediatric Center at Renaissance is committed to providing optimal care to our patients and their families and feel that this goal is best achieved if everyone is aware of our financial policy. Changes in the health insurance industry have made the cost of healthcare challenging for both patients and healthcare providers. We have developed this policy to serve as a clear understanding of our billing practices and to help with any questions about your financial obligations.

### **Payment Procedures and Payment Options**

Full payment is expected at the time of service, regardless of who brings the child to the office. This includes applicable deductibles and co-payments. We accept cash, personal checks, and all major credit cards. A receipt will be provided to you for all payment transactions. As an added convenience, payment can be made via our website through the patient portal link. Contractual obligations with your insurance plan require us to collect your co-payment in full at the time of service. We cannot reduce or waive co-payments, deductibles or other cost-sharing balances that are due following your insurance carrier's adjudication of your claim. The accompanying parent or other adult is responsible for full payment due at the time of service and for providing the proper insurance identification.

### **Insurance Coverage**

We participate with several insurance plans. As insurance plan benefits vary, it is the policyholder/parent's responsibility to know the specific benefits of their plan. We will bill the insurance companies we participate with. If your carrier requests other information from you such as evidence of other insurance, they will not provide reimbursement of your claim until you provide the requested information. If you fail to do so, you will be billed for any outstanding charges.

If you have failed to provide the correct insurance information, you must notify us immediately and we will attempt to submit a claim with the correct insurance company. However, if the claim is denied for any reason, or if it is past the timely filing limit per your insurance, you will be responsible for payment of all charges.

While many insurances cover preventative care in full, there may be some services during a well child visit that your insurance chooses not to cover. ***PLEASE NOTE, when a well child checkup and sick visit occur on the same day, insurance plans typically require co-payment and/or co-insurance for services related to the sick visit.*** If a problem or illness needs to be addressed during a well child checkup, the provider will normally complete both services. This is normally a convenience for the patient/family and in best practice with addressing any problems/issues timely. The accurate billing when this occurs includes charges for both a well and sick visit.

### **Non-covered Services**

We will always provide your child with, what we consider the best and most up-to-date medical care. Some insurance plans limit coverage of procedures and services to control their costs. As a result, certain services we may provide for your child may not be reimbursed by your plan. Although we will submit a claim with your insurance, please be aware that some, and perhaps all, of the services provided

may be “noncovered” services or may not be considered reasonable and necessary by your insurance company. Except as provided by your insurance contract or by state law, you will be responsible for all charges not covered by your policy.

### **Secondary Insurance**

If your child is covered under two insurance policies with which we are in-network with, we will submit claims to both plans. Once the primary insurance payer processes the claim, additional balances due may be submitted to the secondary insurance plan. There are guidelines that govern which plan is deemed primary and secondary. Please consult with your insurance plans for determination of such.

### **Newborn Enrollment**

It is essential that you contact your insurance plan or the policy holder’s Human Resources department to enroll your newborn on your policy. We recommend doing this within the first few days of your baby being born as it often takes a few weeks for the baby to show up on the plan as a covered member. Delaying enrollment may result in us having to bill you directly.

### **Laboratory Services**

We will send your lab work to the in-network or preferred laboratory based on the insurance information you have provided to our office. We are not liable for insurance billing and balances due from outside labs.

### **Referrals**

Our providers will make referrals to specialists when clinically indicated. It is the responsibility of the policyholder to make sure the specialist is in or out of network with their insurance plan. Pediatric Center at Renaissance assumes no financial responsibility for any out of pocket expenses related to the care of the patient with the specialist. Any financial agreements related to account balances are between the policyholder and the specialist’s office.

### **Holiday Hours/Weekend Clinic**

There may be an additional fee charged for visits occurring outside of routine office hours (holidays) and for visits to our Saturday clinic. We will bill this charge to the participating insurance plan. You may be responsible if your insurance carrier does not cover this charge. The Saturday charge for private pay patients is \$15.

### **Medical Records**

With the signed request from the patient, parent, or legal guardian, we will provide you with a copy of your child’s medical record. There is a charge of \$25 for the first 25 pages and \$.50 for every page thereafter. Copies of medical records must be picked up and paid for by the patient’s guarantor. Our medical records release form is available on our website at [www.mcallenpediatrics.com](http://www.mcallenpediatrics.com).

### **Appointment Cancellation Policy**

Missed appointments or late cancellations represent a cost to us, to you, and to the patients who could have been seen in the time set aside for you. All cancellations must be made at least 24 hours prior to your scheduled appointment to avoid a \$25 fee. The fee applies to each patient appointment. Patients

