

# Town Center Pediatrics

## Financial Policy

### Healthcare Insurance and Patient Responsibilities

Our goal at Town Center Pediatrics (TCP) is to maintain a good provider-patient relationship. Due to increased insurance company demands, and to help avoid misunderstandings, we ask that you please read and abide by the terms of the following financial policy. TCP accepts a wide range of insurance plans. We bill as a courtesy to our patients when a current/active card is provided to us. However, all policies have different benefits, and we cannot know the specific details of each individual policy. It is **YOUR RESPONSIBILITY** to know the terms of your individual policy, such as benefits, co-insurance, coverage exclusions, deductibles, etc.

### Insurance

**Insurance Card:** It is critical that you bring the most current insurance card to **every** appointment. We must have the correct information at the time of service. You are responsible for adding your newborn child to your insurance prior to your appointment. An insurance card is similar to a credit card--the information must be current and valid in order for you to use the card

**Secondary Insurance:** It is the parent/patient responsibility to notify our office if there is a secondary insurance.

### Co-Pays

Contracting with health insurance companies requires us to collect co-pays and deductibles. Your co-pay is due at the time of service, regardless of who brings in the child for the appointment: grandparents, friends, divorced parents (see below), etc. If the co-pay is not paid at the time of service, TCP will add \$10.00 to your co-pay balance. If you make full payment by the end of the day, however, the fee will be waived.

#### Divorce/Custody

Town Center Pediatrics will NOT honor the specific financial arrangements set forth in a Child Custody Agreement, Separation Agreement, Divorce Settlement Agreement, or Divorce Decree from Judgement. Since Town Center Pediatrics is not a party to these Arrangements, TCP is neither obligated nor bound by the financial terms of these arrangements.

Regardless of child custody, the adult who presents a child for care and treatment is responsible for the co-pay at the time of service. This policy applies whether there is a joint-custody arrangement for the child and/or joint responsibility for medical expenses. No matter who "carries" the health insurance, TCP will still collect the co-pay from the adult who is with the child at the time service is rendered. Upon request, we will provide a duplicate copy of your receipt so that you can seek reimbursement where appropriate.

### No-Show Fees

Any well visit not cancelled at least one **full** business day prior to the appointment will be assessed a \$50.00 no-show/late cancellation charge.

### Accounts, Credit, and Collections

Even though you may have an insurance claim pending, you will receive a monthly statement for the outstanding balance on your account. Balances must be paid, or arrangements for payment must be made upon receipt. TCP will add interest to unpaid 90-day balances at the compound rate of 18% per month. Furthermore, **TCP will not** see your children for well child visits until you pay the balance in full or arrange a payment plan acceptable to Ruth.

If TCP finds it necessary to begin collection proceedings on your account, you hereby authorize TCP to release to a third party all pertinent financial and contact information. However, this does not constitute an agreement to release Protected Health Information as defined by applicable law.

There will be a \$25.00 minimum charge for any checks returned for insufficient funds.