



GrowingUpPediatrics

Financial and Practice Policies

I have read the information below carefully and agree to abide by Growing Up Pediatrics Financial and Practice Policies.

Patient Name

DOB

Guarantor Signature

Date

Thank you for choosing Growing Up Pediatrics, PA as your Pediatric Provider: We are committed to working with you to provide the best medical care for your child with the goal of good physical, emotional and mental health. In order to continue to provide this care, we must receive payment for our services. Please read the detailed financial policy below, let us know if we can answer any questions, and sign in the space provided. A copy will be provided to you upon request.

Well-Child Checkups: Growing Up Pediatrics requires its patients to have regular well-child checkups at age appropriate intervals. A consistent history of well visits provides doctors critical baseline information should your child become ill, experience developmental irregularities, or encounter complexities in their healthcare. Well-child checkups should occur at 5 days (weight and color), 2 weeks (growth and evaluation), 4 weeks, 2 months, 4 months, 6 months, 9 months, 12 months, 15 months and 18 months. From 24 months to 18 years well visits should be scheduled annually. Our policy is consistent with the American Academy of Pediatrics' recommendations which can be found on their website, www.aap.org. We reserve the right to terminate care to your family, if regular well-child checks are not maintained.

Vaccines: Our goal is to promote child wellness and health. We offer pediatric vaccines according to the Center for Disease Control schedule. If you choose not to vaccinate your child on the CDC schedule, we require you to sign our Vaccine Refusal Form at each Well-Child Checkup.

Insurance: It is essential that you provide us with complete, accurate information so that we may properly submit billing information to your insurance company. We make every effort to submit insurance claims quickly and provide you with our statements. By signing this document, you authorize and direct your insurance carrier(s) to issue payment directly to Growing Up Pediatrics, PA for services rendered to your dependents.

Your insurance policy is a contract between you and your insurance company. Please review your policy and become familiar with the terms and benefits of your plan. Our relationship is with you and your dependents. The obligation to ensure payment in a timely manner lies with you. Your signature above guarantees payment for all services that are provided to your dependents for any and all costs that are not paid by your insurance company. We are not responsible for delays, misplaced claims, or the need of the insurance company for additional information from you.

Co-Payment: All copays, as well as outstanding balances, will be collected at appointment check-in. We are bound by our contracts with insurance companies to collect co-pays.

Deductibles and Co-Insurance: If your health insurance qualifies as a High Deductible Health Plan and you have not met your deductible, we ask that you pay a \$50 fee at the time of service. This fee will be applied to the total expense for the visit. We do not charge this fee for Well Child appointments. If your insurance shows that you have met your current year deductible after we have collected this fee, this amount will be credited to your account. We will collect any percentage of the co-insurance or deductibles not met at the time of service. These amounts are calculated based on a negotiated fee schedule with the insurance company.

Self-Pay Patients: We offer a self-pay discount if you do not have insurance. Payment in full is expected at the time service is rendered. If you require a payment plan, please speak with someone in our Billing Department. We will make every effort to come to agreeable terms regarding a payment plan.

Payment Options: We accept cash, credit card, and check as payment for services. As a convenience, we can keep your credit card on file to process payments owed. This service will require the completion of a separate Credit Card Authorization form. If you are unable to meet your financial obligations, payment arrangements can be made. Please speak with someone in our Billing Department to discuss payment options.

Claims Filing: We will file claims for those insurances with which we are contracted, as well as secondary insurance. We accept the contractual write-off based on your primary insurance. Once we have received instruction from your insurance company, you will receive a bill for any outstanding balance. You will then be responsible for that balance.

Keep Us Informed: Most often errors in billing and claims payments are related to incorrect information. Please update us with name, address, email address, phone number and insurance information as it changes.

Collections: We will make several attempts to work with you to keep your account in good standing. If your account remains unpaid for a period of 90 days or more, then we may discharge your child/ children from the practice. You will receive at least one letter regarding your account prior to GUP considering termination.

After Hours Phone Calls: Please be aware that telephone calls managed by our after-hours service may be subject to a \$10.00 charge billed directly to you, not your insurance company. Be sure to visit our website for answers to commonly asked questions and over-the-counter medication dosages.

Extended Hours Appointments: Sick visits scheduled during our extended office hours (Mondays after 4:45pm, Saturday mornings and Holidays) will be billed with an additional charge to your insurance company. Your insurance may or may not cover this charge. If they do not, it will become your responsibility.

Returned Check Fees: You will be charged a fee of \$25.00 for all returned checks.

Forms/Records: Please allow 3 business days for the completion of forms requiring a physician's signature. Forms can be completed in less than 3 days for an expediting fee of \$25.00. If you choose to transfer from Growing Up Pediatrics to another medical practice, we will provide a copy of the patient's vaccine record and growth chart at no charge. There may be a fee for any other medical records. GUP staff will advise you of this fee prior to your transfer. Release of medical records requires a signed Authorization to Release Medical Information form.

No-Shows, Cancellations & Late Appointments: Please give our office 24 hours advanced notice of cancellation so that we may offer that appointment to another patient. If you are more than 15 minutes late for your appointment you may be required to reschedule to a later date. If your family members have more than three no-shows or day-of cancellations, we have the right to terminate care to your family.

Termination of Care: While we make every effort to partner with our patient families, there are unfortunate times when we must terminate care of your child or children. If this happens, you will be notified in writing with a termination date. We would continue to provide medical care for sick appointments only for 30 days, providing you time to locate another primary care physician. All medical records will be made available to you upon the completion of a medical records release form that can be downloaded from our website.

Custody Payment Issues: Due to the many complicated issues that arise due to custody and payment issues, it is our office policy that payment is expected by which ever parent is bringing their child to the appointment.

Feedback: We love to hear good news about our services, but always can do better. If at any time, you have a complaint regarding our office or employees, we do want to hear about it. Please speak directly to our Practice Manager, Lee Johnson. We strive to improve our patient experience and take respectful, constructive input seriously.

Inappropriate Behavior: Growing Up Pediatrics strictly prohibits verbal or physical abuse or threats of any kind to our physicians, nursing staff or office staff. We will not tolerate any negative comments about our office, physicians or staff members to be posted on any form of social media. If you are witnessed displaying these types of behavior in our office or on social media, you will be dismissed from our practice and will need to find medical care elsewhere. For the health of our patients and staff, tobacco products may not be used in office at any time. This includes but is not limited to cigarettes, chewing tobacco and e-cigarettes.