Financial Policy Pomona Pediatrics, PC A Division of Children's and Women's Physicians of Westchester

Please review the following summary of financial concerns regarding Pomona Pediatrics' Financial Policy and the handling of insurance matters. If you have any questions, feel free to contact the office during regular business hours.

INSURANCE INFORMATION

- As there are many insurance companies and innumerable different plans, it is your responsibility to know the provisions of your insurance plan. Please remember that the policy holder must abide by the contract that he/she has entered into with the insurance company. These provisions may include, but are not limited to:
 - Use of a particular laboratory appointed by your insurance company
 - Need for a referral to see a specialist
 - Requirement of pre-authorization for a service
- It is imperative that the office have your correct insurance information on file at all times. This
 includes both primary and secondary insurances if applicable. If the office does not have the
 correct insurance information and the insurance company denies the claim, the policy holder is
 responsible for all the costs on that date of service.
- If a copay is required by your insurance, the payment is due at the time of service. A \$25 billing fee will be charged if it is not paid at that time.
- If your insurance plan includes a deductible, that amount will be billed to the policy holder.
- It is Pomona Pediatrics' policy to bill the policy holder according to the Explanation of Benefits issued by the insurance company. If there is an error on the Explanation of Benefits, it is necessary that the policy holder contact the insurance company in order have the claim reprocessed.
- For families without insurance, a discount is available when payment for services is made at the time of the visit.

OUTSTANDING AND DELINQUENT BALANCES

- Accounts with outstanding balances greater than 90 days old will be considered to be in collection status. At that point, physicals and well baby checks will not be scheduled until the balance is paid, or a payment plan is arranged with the business office.
- In the event that your account is sent to a collection agency, you will be asked to find alternative pediatric care within the next 30 days. In addition, a fee in the amount of 50% of the outstanding balance will be added to the total amount owed. This fee will be applied to the charges incurred by Pomona Pediatrics pursuing collection action.

PAYMENT POLICIES

- All copayments and co-insurance payments are due at the time of service. There will be a \$25 billing fee if these payments are not paid at that time
- The adult who brings a child to the office is responsible for full payment. In the event that the child
 is accompanied by someone other than a parent, of for an older child coming alone, please make
 sure that that person is prepared to pay any copayments.

• In the event of a divorce, Pomona Pediatrics is not a party to any marital agreements, and responsibility for payment rests with the adult who accompanies the child to the office. We do not split bills, or bill multiple parties. It is your responsibility to work out any other issues with the other party.

MISSED APPOINTMENTSAND OTHER FEES

- Missed appointments represent a cost to us, to you, and to other patients who could have been seen in the time reserved for your appointment. A fee of \$25 will be charged for appointments not canceled at least 24 hours in advance. In the event of an emergency, please give us the courtesy of notification as soon as possible. Repeated missed appointments may be grounds for dismissal from the practice.
- An additional fee will be incurred for visits outside of normal business hours. This includes
 evenings, weekends and national holidays. This fee is due to the increased costs of staffing the
 office outside of routine hours. Insurance companies and parents find this preferable to the
 significantly higher costs and greater inconvenience of emergency room and urgent care center
 visits.
- School and camp forms: A Universal Health Examination form will be provided without charge at the
 time of your child's annual physical examination. We suggest that you keep the original of this form,
 and make copies which can be attached to any blank forms provided by schools or camps. Our
 form contains all the information required by schools and camps in our area. Should you require a
 duplicate form, or should it be necessary for us to manually complete any other forms, a fee of \$10
 will be charged.

Please be sure to fully understand your insurance policy prior to visiting our office.