

## FINANCIAL POLICY

We are committed to providing the best possible care to our patients and their families. This goal is best achieved if everyone is aware of our office policies. Your clear understanding of our financial policy is important to our professional relationship.

### Timely Payment

We are doing everything possible to hold down the cost of medical care. You can help a great deal by eliminating the need for us to bill you. Full payment is expected at the time of service unless other arrangements have been made in advance.

Our contract with the insurance companies state that we must collect a co-pay at the time of service. When you do not pay your co-pay, you are in violation of your contract. We are also in violation of the contract since the insurance companies mandate that we charge and collect the co-pay. There will be a \$10 service charge added to your balance when the co-pay and balance is not paid at the time of service. The fee will be deleted if paid within 24 hours.

The benefit packages provided by insurance companies vary from employer to employer. You must learn the benefits in your policy and follow the rules of your insurance company. This includes vaccine and well child care coverage, authorization for specialty care, procedures and lab tests. We will bill those insurance companies with which we participate but if we are not paid in a timely fashion, you will be expected to pay the balance in full. Except as provided by such contract or by state law, we will hold you responsible for all charges.

Patients with an outstanding balance must make payment arrangements prior to scheduling further appointments. If you are experiencing financial difficulty, please let us know.

If you need assistance or have any questions we can be reached Monday through Friday, 8:00 to 5:00.

In the event any delinquent accounts are turned over to our collection agency you will be responsible for any collection fees and interest that accrue **and will be required to pay your balance in full before we can see or schedule another appointment.**

### Responsibility for Medical Care

Every minor child seen in our office for medical services must be accompanied by a parent or legal guardian or by an adult who has obtained written consent for treatment from the parent or legal guardian. An exception is an adolescent presenting for confidential services that we are permitted by state law to provide without notifying the parent.

The accompany parent or other adult is responsible for full payment at the time of service. In the case such as divorce where the custodial parent is not the insurance holder we will bill the covering insurance company however the co-payment must be paid at the time of service. If there is a dispute about the financial responsibility, we will then hold the accompanying adult responsible for payment. We find it very difficult to look after your child's medical care needs when we are placed in the middle of a martial dispute.

### Managed Care

If your insurance plan requires us to complete a written referral in order for your child to see another specialist, please let us know in advance. Most insurance companies do not accept retroactive referrals and would violate insurance contracts.

### Missed Appointments/Late Cancellations

Broken appointments are a cost to us, to you and to other patients who could have used the time set aside for your child. Please call at least 24 hours in advance to make any scheduling changes. We reserve the right to charge a \$50 fee for appointments that are missed or cancelled with less than 24 hour notice. In the case of a returned check, a fee will be charged to the maximum allowed by Kansas State Law. After a returned check, we will accept cash only.