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Financial Policy

Thank you for choosing Piedmont Pediatrics, LLC as your health care provider for your children. We are committed to providing you and your child/children with the highest caliber of care. As part of your relationship with Piedmont Pediatrics, a clear understanding of our financial policies is important so you will know what actions Piedmont Pediatrics will be undertaking on your behalf as well as what your financial responsibilities are to Piedmont Pediatrics. Your health insurance policy is a contract between you and the insurance company. You have certain responsibilities to ensure that proper, accurate and timely submission of charges occurs.

You are required to:

- Present the proper insurance card for your child/children at the time of service. You must bring a valid insurance card to every visit.
- Present a picture ID (driver's license preferred) for verification of identity, if requested.
- Pay your co-pay at the time of service. As participating providers with your medical insurance plan, our office is required to collect your co-payment on the date of service. If you are unable to pay your co-payment at the time of your appointment the office will charge a \$10.00 Administrative surcharge for processing your co-payment after your visit.
- Submit payment and assume responsibility for all charges your health insurance company does not pay for. This includes your co-pay, co-insurance, policy deductibles, and all non-covered services and the outstanding balance after your insurance company has submitted payment to Piedmont Pediatrics, LLC.
- Pay your account balance in full within 30 days of receiving Piedmont Pediatrics' statement of outstanding charges. If your payments are not received in a timely manner and your account is not kept current, your account will be sent to Piedmont Pediatrics Third Party collection agency. Please note you will be responsible for all collection fees. Provided below is a more detailed description of your financial responsibilities.
- You are responsible for knowing the benefits and provisions of your insurance plan. If you have any questions regarding your benefits, please contact your carrier prior to your visit in the office.

We request that you be able to provide valid insurance coverage at every office visit. If we are unable to verify active coverage, any and all fees for your services will be due on the date of service. Insurance claims are filed as a courtesy with the participating plans when there is a valid insurance card provided. You must report any insurance changes to the office as soon as possible. Any information that is inaccurate after the date of service may not be billable to the insurance carrier (in some cases) and may become the responsibility of the account guarantor.

Newborn

When adding a newborn to your insurance plan, please check with your Human Resources department about the requirements of your health plan. Most plans require that newborns be added to the policy within 30 days of birth.

Many insurance policies require prior authorization for tests, including lab and radiology, procedures, specialist referral visits, or hospital admissions. While we try to assist our families with these guidelines, it is the responsibility of the policyholder to know and understand these requirements to avoid costly penalties and denials by your insurance company.

Responsibility for Payment

Even though you have health insurance, you as the guarantor are responsible for payment of all services provided by Piedmont Pediatrics. Piedmont Pediatrics will bill your insurance company, or all services rendered, with the information you have provided us. If your insurance information has changed, please notify us immediately so we may bill the correct insurance carrier.

Co-Payment

Your health insurance policy may state that you must pay a co-payment for all physician visits. This payment is due the day services are rendered to your child/children. Piedmont Pediatrics has a contractual agreement with the health insurance carriers to collect all co-pays on the date the services are rendered.

Remaining balance after your Insurance Company has processed and paid

Once your insurance company has processed your claims, Piedmont Pediatrics will post any payment it receives to your account. If there is a remaining balance, the balance will now be your responsibility. This balance includes your deductible, co-insurance, and all non-covered charges. As stated before, we request that you pay your balance in full within 30 days of receiving your statement. We encourage our patients to enroll in our Autopay program for a more convenient and efficient way to pay your remaining balance.

Returned Checks

Piedmont Pediatrics charges a service charge of \$35.00 for all returned checks.

Missed Appointment/No Show Visits/Late Cancellations

Missed appointments and late cancellations/rescheduling represent a cost to us, to you, and to other patients who could have been seen in the time set aside for you. **We require at least a 24-hour notice** for any cancellations or rescheduling of a previously scheduled appointment. Failure to cancel or reschedule your appointment 24 hours in advance will result in a \$50.00 administrative fee per appointment. These fees are not covered by your insurance company and are the sole responsibility of the guarantor on the account.

Saturday office hours

Piedmont Pediatrics operates on Saturdays for urgent care/sick children only. Piedmont Pediatrics charges an additional fee for Saturday services. This fee may or may not be covered by your insurance carrier.

Medical Records

Requests for medical records require a signed Medical Release Form stating the authorization of the release from Piedmont Pediatrics to either the parent or current physician's office. Piedmont Pediatrics will release one (1) copy of standard medical records at no charge. After the first copy, there will be a charge in accordance with the guidelines set forth by the State of Georgia for copying medical records.

If you are transferring from another pediatrician, we request that you have those medical records transferred to our office before services are rendered here.

Divorced Parents

Piedmont Pediatrics will not get involved in custodial, separation or financial disputes involving or relating to divorced parents for a minor child(ren) to whom we provide services. The parent who signs the financial policy and registration form of the minor child(ren) will be the responsible party for payments of services rendered. Please note that the court Divorce Decree is an agreement between the two divorcing parties and not between Piedmont Pediatrics and the parents.

Dismissal

If you are dismissed from the practice, it means you can no longer schedule appointments, get medication refills, or consider us to be your doctor. You will have to place your child in the care of another physician.

Common reasons for Dismissal

- Failure to keep appointments, frequent no-shows
- Noncompliance, which means you won't follow physicians' instructions about an important or critical health issue.
- Abusive to staff
- Failure to pay your bill

Dismissal Process

We will send a letter to your last known address notifying you that you are being dismissed from the practice. If you have a medical emergency within 30 days of the date on the letter, we will see you. After that, you must find another doctor. We will forward a copy of your medical records to your new doctor after you let us know who it is and a released from is signed.