



Sun Pediatrics

FINANCIAL POLICY

Thank you for choosing Sun Pediatrics. Our office is committed to providing the best possible treatment, as well as assisting you with insurance filing and payment of your account. In order to accomplish this, we have provided you with a financial policy

INSURANCE COVERAGE

We accept most commercial insurance and Medicaid plans except Kaiser, Humana Connect plans, Humana HMO X, Tricare. If you are not certain whether we accept your insurance, please call your insurance carrier to inquire. It is your responsibility to understand the limitations of your insurance coverage.

You must present your child's insurance card and a valid photo ID at every visit. We expect you to give complete and current demographic and insurance information for us to file the claim to your insurance carrier. If this information is **incomplete or not updated**, we will require payment in full of your charges on the day of the visit. There will be a \$25 refiling fee if the correct information is not provided at the time of service. **Copayments, outstanding balances from deductibles and coinsurances are due at time of service.** A \$ 25 billing fee will be assessed for failure to pay copayment at the time of service. As a courtesy to you, we will routinely file all claims with your insurance company. Some of the services we provide may not be covered by your insurance company, and you will be responsible for these charges. **Disputed claims are contractual issues between you and your insurance carrier.**

If we are not contracted with your insurance carrier, or you are self-paying, your charges must be paid in full at the time of service.

New parents are required to notify their insurance plan of their newborn within first 30 days of birth. At the initial visit, we require you to sign a financial agreement to cover for the first visit.

If your child is scheduled for a Well Child Exam or a Shot only appointment, but is experiencing symptoms that are addressed by the physician, you may be charged for a "sick" office visit. Depending on your insurance, you may be responsible for a copayment, coinsurance, and/or deductible. Payments for non covered or elective procedures are due at the time of service. If you receive a bill from outside laboratory, we ask that you contact to resolve any questions you may have

PAYMENT OF SERVICES

We accept cash, credit cards (Visa and MasterCard), and debit cards. We do not accept personal checks. You can also make a payment online by visiting our website <http://www.sunpediatrics.com/>

Co-payments and other out-of-pocket expenses are due at check in. The adult accompanying the child to the appointment is responsible for co-payments.

There is a \$ 10 charge for all camp, sports, medication forms, school forms and letters to school or daycare. This does not include (3231/3300 forms) for which there is no charge. Please allow 3-5 business days for completion of all forms.

There will also be a \$50 fee for all qualified FMLA, Katie Beckett, Disability forms or any other forms that require notary.

There will be a \$50 fee for missed appointments and late cancellations. The fee is not covered by your insurance company, and will be billed directly to you. Multiple missed appointments may lead to dismissal from the practice.

A copying fee of up to \$ 25 per chart each time a copy of medical records is requested for any reason

Patient with delinquent balances will not be permitted to schedule routine well exam appointments until the balance is paid in full.

Failure to pay balances within 90 days from the date of service can result in your account going to an outside collection agency. There will be a \$25 fee added to your balance at that time.

In case of divorced or separated parents, **the accompanying parent/adult is responsible for all co payments, deductibles, coinsurances, and any other out of pocket expenses.**

BILLING INFORMATION

Please feel free to contact our billing department at 678-904-3634 if you should have any questions regarding your bill.