

Arvada Pediatric Associates Financial Policy

Welcome to Arvada Pediatric Associates

We are pleased to have you as our patient. Arvada Pediatric Associates is dedicated to providing quality, accessible, and cost effective health care services to our patients and we strive to make every visit a positive experience. This information was designed to provide our parents, guardians and patients with a detailed explanation of our financial policies. We realize this information may not always address your specific situation and encourage you to speak with a member of our Patient Accounts Staff whenever you have any questions or concerns regarding your account.

Registration

The registration process is a vital link in your visit to Arvada Pediatric Associates. Information gathered provides us with contact information as well as ensures your claims will be filed to the correct insurance company.

Upon arrival at any Arvada Pediatric Associates office, you will be asked for basic information.

- Current patient information: name, address, telephone number, employer, social security number, and emergency contact.
- Current responsible party information: name, address, telephone number, employer, social security number, and driver's license.
- Current insurance card.

Please arrive at least ten minutes prior to your appointment time for the check in process. Having information readily available will assist us in making the check-in process easier for you. Information obtained in the registration process is kept in your confidential medical record.

Co-payments

Co-payments will be collected at the time of your visit. Please check with your insurance company for the requirements and provisions of your policy to determine the dollar amount of your co-payment prior to your appointment.

Payment Method

For your convenience, we can also handle your payments on your account at the Registration Desk. We accept cash, check, debit cards and major credit cards.

General Insurance Policy

As a convenience to you, our Patient Accounts Staff will file a claim on your behalf provided we have your current insurance policy information available. However, it is impossible for our staff to determine your coverage and payment levels, since each insurance company offers many options as part of their health care coverage package. Charges are assessed according to the medical services rendered that day. From time to time, procedures done in the office may not be covered or may be applied to out of pocket expense by your insurance company. If additional time is spent during a wellness visit addressing issues outside a normal wellness exam, additional time may also be billed.

Our staff cannot guarantee that your insurance carrier will pay all or even part of your claim. Your insurance policy is a contract between you and your insurance carrier. Ultimately, the patient is responsible for their Arvada Pediatric Associates charges. Patients should resolve disputed coverage issues directly with their insurer or employer. It is the patient's responsibility to know the details of their insurance contract and if Arvada Pediatric Associates is a network provider for their particular plan.

When your insurance company processes your claim they will provide you with an Explanation of Benefits (EOB). This EOB will explain what the insurance company has agreed to pay. Arvada Pediatric Associates maintains only one fee schedule based on national standards and it is developed independently from the multiple different schedules followed by insurance companies. Therefore, because of policy deductibles, co-payments, and non-covered services, you may have a balance due after insurance pays.

Families with Multiple Households

We at Arvada Pediatric Associates understand that these situations require special handling. All efforts will be made to comply with your instructions regarding the billing. However, with the numerous issues that arise in these cases, the clinic cannot act as administrator to resolve financial arrangements. The parent or guardian who carries the insurance of the child will be considered the responsible party and will receive all billing statements and correspondence. Ultimately, both parents are legally responsible for the account balance.

Dependents

A patient is considered a "dependent" as long as he or she remains covered under the parent/guardian's insurance policy. Newborns need to be added to your policy within the first 30 days of life, and let our Patient Accounts Staff know when they have been added.

"No Show" Policy

A "no show" is when you fail to arrive for your scheduled appointment, arrive 10 minutes late or more for your scheduled appointment, or call less than one hour prior to your appointment to cancel.

A notification letter will be mailed to you with your first "no show visit." A second "no show" may result in the family's dismissal from our practice.

Non-Sufficient Funds Checks

There will be a \$20.00 charge for all returned checks.

Liabilities

Arvada Pediatric Associates does not submit charges to third party liability carriers such as Workman's Comp or automobile insurance. It is the obligation of the responsible party to settle any outstanding liability charges. Arvada Pediatric Associates cannot act as administrator to resolve financial arrangements. The balance for services rendered is considered due in full at the time of the services.

Participation with Insurance Companies

Arvada Pediatric Associates reserves the right to determine which insurance companies or programs we participate with on an annual basis.

Medicaid

All Medicaid patients must present a valid card prior to being seen. If the patient wishes to be seen without their validated card, they will be required to make payment at time of service or asked to reschedule.

General Credit Policies

Payment in full or the amount not covered by your insurance carrier may be required prior to receiving care.

All accounts are payable upon receipt of your first statement. Credit is extended as a courtesy and payment arrangements are available by contacting our Patient Accounts Office.

If you are not covered by a medical insurance plan payment is expected at the time services are provided. Payment in full at the time of service may be eligible for a 20% administrative discount.

Any account that has had been turned over to a collection agency will be reviewed for a Credit Withdrawal of Care.

Copy Fees for Records

APA does not charge a fee for copying records when sent to other physicians for continuity of medical care. However, usual and customary fees are charged when copies of records are required for non-medical purposes such as legal, life insurance applications, and personal use.

Fees:

\$14.00 for the first 10 pages

50 cents per page for pages 11-40

33 cents per page for pages 41 and up

Questions Regarding Your Account

If you have questions regarding your account please contact our Patient Accounts Staff at 303-467-9548.