



## Office and Financial Policy

As part of an effort to provide the best possible medical care to you, we would like to explain our office and financial policies in advance:

### Financial

- Patients are responsible for payment of all co-pays, co-insurance, or deductibles at the time of service.
- We accept cash and major credit cards (Visa/Mastercard). Checks will not be accepted.
- Payment is the responsibility of the person bringing the patient in for care. This includes parents, guardians or any adult with written permission to bring the patient to our office.
- In cases of court determined financial liability, third party liability, accidents or divorce, the person bringing the patient in is responsible for payment.
- We will furnish a receipt for your records as proof of payment.
- Monthly statements will be sent for any unpaid balance. Prompt payment to unpaid balances is appreciated.
- Please contact our billing office with any concerns regarding your bill. Your child's health is our priority and we will work with you in the event of unusual circumstances that may delay prompt payment.
- There is a \$25 charge for any check returned for non-sufficient funds. The physician and staff work extremely hard to be accessible at all times, and provide quality, timely service for our children. In return, we expect patients to fulfill their financial obligations in a timely manner. If your account becomes severely delinquent and is turned over to collections, you will receive a termination notice from our office providing a 30-day notice. Once services are terminated, the patient will no longer be allowed to return to Acclaim Pediatrics.

### Insurance

- We must have current insurance and patient information. We will ask for a copy of your current insurance card at each visit and will periodically ask for updated information. This helps to ensure that we are filing your claim correctly. It is our practice to file insurance claims as a service to you. If you do not provide us with the correct information to file a claim, then you will be responsible for payment of the balance due.
- Please review your insurance coverage carefully and be familiar with any limitations in well child coverage and immunizations. Some insurance plans will cover check-ups but limit or exclude immunizations. Your insurance policy is a contract with you as the parent or guardian, and not with Acclaim Pediatrics. We will do our best to be aware of the general policies of our more common insurance carriers, but we cannot be responsible or guarantee the details of your coverage.
- If your insurance requires, you must designate Acclaim Pediatrics as your primary care provider prior to your scheduled appointment. If Acclaim Pediatrics is not named as your primary care provider, you may be asked to reschedule your appointment and you will be financially responsible for the visit.
- Medicaid recipients are responsible for keeping their card up to date as well as having Acclaim Pediatrics listed as the primary care physician. Any charges incurred with a lapsed card or with another physician listed as the primary care physician will be the responsibility of the parent/guardian and payment will be expected at the time of service.

### **Appointments and Missed Appointments**

- You are required to bring proper identification and a current insurance card to all appointments.
- Acclaim Pediatrics may find it necessary to dismiss patients from our practice as a result of missed appointments without 24 hours advance notice (after three no shows you may be dismissed from this practice).
- If you fail to keep your appointment without a 24-hour prior notification, you are liable for the \$25 charge for the time that is kept specifically for your appointment.
- If you arrive more than 15 minutes late for your appointment it may be necessary to reschedule.
- We encourage patients to schedule appointments. We do accept walk-ins however if you walk in without appointment, you may need to wait till provider has seen the scheduled patients.

### **Referrals**

- Please allow 5 business days to complete the referrals
- Advance notice required for all non-emergent referrals
- It is your responsibility to know if a selected specialist participates in your insurance plan.

### **Prescription Refills**

- We require 48 hours advance notice for all prescription refills.

### **Medical Records**

- Pls allow 5 business days to process your medical records request.
- We only provide records for visits done at Acclaim Pediatrics.
- If you need records for another physician, you must request them directly from that physician.
- Acclaim Pediatrics will provide you a copy of your child's medical records for a fee of \$25 for the first 20 pages and 50 cents per page thereafter per page.
- There is a fee of \$15 for the completion of FMLA forms and \$10 for all school/sports/camp physicals that are not brought in at time of visit.

### **Conduct**

- We always require all adults to act responsibly while on our office premises. Acclaim pediatrics will not tolerate aggression, inappropriate/ foul language, yelling, name-calling or temper tantrums from any adult. If you are non-compliant you will be asked to leave the office immediately and patient will receive a termination notice from our office providing a 30-day notification to find another provider.

### **Newborns**

Most insurance companies will require that you add your newborn to your policy within 30 days of birth. In many cases, if this deadline is missed, you must wait until the next enrollment period for the insurance company to add your newborn. This is true even with "family coverage."

I have read and understand this policy and agree to comply and accept the responsibility for any payment that becomes due as outlined above.

\_\_\_\_\_  
Printed Patient Name

\_\_\_\_\_  
Signature of Patient or Legal Guardian

\_\_\_\_\_  
Date

**Acclaim Pediatrics**  
**2626 S Carrier Pkwy, Suite 300**  
**Grand Prairie, TX 75052**