Austin Children's Clinic, PA

Financial Policy

Thank you for choosing us as your healthcare providers. The following is information we hope will help you understand our insurance and payment policies.

Your agreement with this policy is required prior to any treatment.

- Insurance: We file insurance only with insurance companies with which we have a contracted agreement. In the event that we are not contracted with your insurance you will be required to pay for your visit at the time of service and you will be given a receipt that you can use to file the claim yourself.

- Payment: Payment for all copays, coinsurance and deductibles are expected at the time of service and must be paid by the person accompanying the child. If you do not have insurance you will be expected to pay in full at the time of service, unless prior arrangements have been made. In the event you are unable to pay a balance we encourage you to contact our billing office to arrange a budget agreement. There will be a $10.00 billing fee added to any copay that is not paid at the time of service.

- Account Guarantor: In divorce situations, it is the policy of our office that the insured parent is the guarantor of the account (the parent responsible for payment of the account). We are unable to negotiate settlement of your medical bills between you and your ex-spouse. ***** All copays, coinsurance and deductibles must be paid at the time of service by the person accompanying the child**.***

- Deductibles**:** Many insurance plans now have deductibles instead of copays. Payment for deductible is expected at the time of service unless you have a Health Saving Account (HSA). Deductibles without HSA's will be estimated by our staff using allowables provided by your insurance company. If you have an HSA we will file the claim to your insurance and you will be billed for any amount not covered. If it is determined that your HSA has been exhausted we will collect the deductible amount at the time of service.

- Covered Benefits: Not all procedures or supplies ordered by the doctor may be considered a covered benefit. Also, some policies do not cover well child visits or immunizations. Payment for any service that is considered "not a covered service" will be collected at the time of service or will be billed to your after your insurance denies payment.

- After Hours Telephone Calls: For your convenience a doctor is available for after hours telephone calls. Unfortunately, most insurances will not pay for this service. The charge for this service is $20.00 per call and will be billed directly to you, not your insurance company. Upon request we will provide you with a receipt for this service if you would like to pursue reimbursement with your insurance company.

- Health Forms and Immunization Records: Health Forms (for school, sports or daycare) and immunization records are best managed at the time of your child's well check. Our staff may complete forms at other times as long as your child has had a well check within the last year. There is no charge for this service at the time of the well child exam; however, a charge may apply at any other time.

- Cancelled/Missed Appointments: Please call at least 24 hours in advance to cancel an appointment. Appointments cancelled with less than 24 hours notice may be charged a $25.00 fee. Appointments missed without notification will be charged a $25.00 fee.

Signature: _____ Date: _____

Relationship to Patient: _____

Name of Patient(s): _____

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Fees are subject to change without notice.