Pediatric Services

Phone 952-922-4200 Business office 952-922-4300 Fax 952-922-4301



Pediatric Services Account and Billing Policy

We will bill your health insurance directly for the services you received at Pediatric Services, PA as long as you supply us with a copy of your insurance card. We have contracts with various insurance carriers, PPOs and HMOs. Charges for the services billed to our contracted insurance carriers will be discounted to their allowed amount. Patients are responsible for any copays, deductibles, any non-covered services and usual and customary amounts for non-contracted insurance.

Financial policy

- Because Pediatric Services, PA participates with many insurance plans, it is your responsibility to
 determine if we are participating providers in your particular plan. Doing so can save you unnecessary
 expenses.
- Parents/Guardians are responsible for knowing their insurance benefits. Insurance plans vary
 considerably, and we cannot predict or guarantee what part of our services will or will not be covered by
 your particular plan. The patient/parent/policyholder is responsible to know the benefits of their health
 plan. We make every effort to resolve insurance issues, but please remember, you are ultimately
 responsible for the cost of your health care.
- Please present a copy of your current insurance card at each visit. All co-payments are due at the time of service as required by your insurance carrier. Please be prepared to pay your co-pay at the time of service or if you do not have insurance, to pay for your visit in full.
- We provide a 10% discount if cash is paid at the time of service.
- Until age 18, the legal parents/guardians are responsible for full payment (regardless of insurance coverage) and will be set up as the person who receives the bill (guarantor) and the legal parents/guardians must provide complete demographic information including both parents' dates of birth and social security numbers, current address and telephone numbers. Pediatric Services will not be involved in negotiating between parents/guardians in dispute.
- If there is dispute about who is financially responsible for the child's healthcare, that is not a matter Pediatric Services can determine or discuss. That decision resides within family court and is a legal decision, not a medical one. We do not provide excessive or inappropriate medical care. If there is concern for overutilization, that can be discussed with your provider, but generally is a matter to be determined by the courts. Please also refer to the policy on divorced or separated families for how much communication may be considered excessive in the event of parents/guardians in dispute.
- Pediatric Services,PA does not become involved in negotiating between parents/guardians in financial disputes. Parents are equally responsible for keeping an account paid, even if there is a court order determining who is to pay. You are welcome to pay the account and collect from the other party.
- Due to privacy laws, patients 18 and older have their own account. Patients that are 18 years or older are legally responsible for their own account. This means that all statements will be in their name and they are responsible for the bill. The patient may choose to remain under their parent/guardian's account with their parent/guardian's consent.
- For patients with insurance, the bill is submitted to the guarantor on file. This is the named person
 carrying insurance for the child. A statement will be sent within 30 days of your visit, unless we are billing
 your insurance carrier. The statement will include charges incurred, date of service, patients' name, the

- diagnosis and procedure codes and any amounts that are due by the insurance carrier and those due by the patient. We will bill you directly for any portion of your bill not covered by your insurance company.
- The determination of what you owe is made by your insurance company. We will mail a statement to you if there is a balance due. Any amount owed is due upon receipt of your statement. You can mail your payment or call our business office to pay at 952-922-4300. Please pay your bill in full when you receive your statement or make payment arrangements with the business office. If you are unable to pay any balance due and would like to discuss payment arrangements, please contact the business office.
- We will work with you to avoid collections. Overdue accounts may be turned over to an outside collection
 agency. Parents/Guardians will be responsible for all additional fees and expenses incurred as a result of
 trying to collect past due bills.
- Our computer system can only send correspondence to one address. It is our policy to use the address where the patient lives. Please notify us immediately of any changes in insurance, address, phone #, etc.
- Our fees are posted in the office and are available upon request.

Some things you should know about insurance coverage:

- Supplies, splints, aerochambers, and hearing and vision exams are often not covered by insurance.
- Mental Health benefits are often different from medical benefits. Common conditions such as ADHD,
 Developmental Delays, Learning Disorders, Depression, Autism, Anxiety, Psychological Testing and others are usually considered under the mental health benefits of an insurance plan.
- Wart treatment and ear cleaning may be considered "invasive procedures" by insurance companies, and paid at a different rate than other services.

Well child exam insurance and billing information

According to AMA guidelines, when a patient presents for a periodic health exam with concerns that require evaluation beyond the scope of a routine periodic health examination, the coding must be adjusted to reflect the additional services performed. The coding used to report these services is not covered by insurance carriers as a periodic health exam. These services are subject to any copay, deductible, or policy restriction that may exist.

Sometimes in the course of a well child exam we may find and diagnose problems, or we may manage a condition which has already been diagnosed. When this happens, we are required to report these services to your insurance company, too. Your insurance company may charge a copay for these services or ask you to pay an additional out-of-pocket amount. If you have an insurance policy that includes a deductible for certain services, such as lab work, you will be billed for whatever portions your insurance company applies to your deductible.

We can perform preoperative exams separately from well child exams so we can dedicate the visit to a complete and thorough assessment of your child in preparation for surgery and general anesthesia. We will be happy to see your child on a different day for a well child exam. There may be a deductible for the pre-op exam if it is performed during a well child exam.

We utilize Quest Laboratory Services for labs. You may receive a bill for laboratory services provided by Quest Diagnostics, which were ordered by your physician. This bill is for laboratory testing fees only and is separate from any bill you may have received from your physician and/or paid at your physician's office.

Need help?

If you are uninsured or experiencing difficulty paying the balance of your medical bill, please contact our business office for more information at 952-922-4300.

A clear understanding of our financial policy is an important part of our professional relationship. We are pleased to discuss the financial aspect of your care. Feel free to contact our billing department for questions regarding fees, financial responsibilities, or our Financial Policy.