



Oak Park Pediatrics Ltd. - Financial Policy

Thank you for choosing Oak Park Pediatrics Ltd. as your health care provider. We are committed to providing your child with the highest level of health care and providing you with the highest level of service possible. Please understand that payment of your bill is considered a part of your child's treatment plan. Your clear understanding of our financial policy is important to our professional relationship.

- We must have a **current** copy of your insurance card on file so that we may file your claims for you in a timely manner.
- Co-payments are due in full at the time of your child's visit.
- If we have a contract with your insurance company, we will file your claims to your insurance company for you. However, you are responsible for any remaining balances. **Your insurance company may not cover all charges such as lab tests in the office, flu shots, well child care, and other medically indicated services.** It is your responsibility to contact your insurance company to determine which charges may or may not be covered. Any non-covered services will be your responsibility, as we often have no way of knowing what each policy may cover.
- Uninsured or non-contracted patients are responsible for payment in full at the time of service.
- Returned checks for non-sufficient funds will be billed an additional administrative fee of \$25.00.
- All outstanding balances must be paid in full prior to well child care visits.
- A \$15 Late Fee will be applied to all balances that have not been paid within 30 days of first being invoiced.
- All balances which have not been paid within 90 days of first being invoiced will be deemed delinquent and referred for collections. All fees charged to Oak Park Pediatrics Ltd. relating to collection efforts associated with your account shall be your responsibility.
- **AFTER HOUR PHONE CALLS:** Oak Park Pediatrics reserves the right to charge \$25 for non-emergent after hour calls. This charge is **not covered** by insurance and will be billed directly to you. You are utilizing the physician's expertise outside of regular business hours and there are extra costs associated with handling patient calls when the office is closed.
- **APPOINTMENT CANCELLATION/NO SHOW POLICY:** In order to efficiently care for all of our patients, we request that you cancel your child's appointment no later than **24 hours** prior to the appointment time. Oak Park Pediatrics Ltd. reserves the right to charge a fee of \$50.00 for no shows or appointments that are not cancelled within 24 hours of the appointment time.
- We reserve the right to charge for medical record copying services. The per patient chart fee is \$10 and an additional \$5 shipping fee will be added for records mailed. Payment must be made in advance of the release of records.

I agree to accept financial responsibility for medical expenses incurred at Oak Park Pediatrics Ltd. and to abide by the above stated policies. I authorize the release of any medical information necessary to process any claims, either to myself or to any parties who request this information.

Signature of Parent/ Legal Guardian

Date

Name (please print)