

Lake Norman Pediatrics *Financial Policy*

We are committed to providing your child the best possible care. Part of that care involves working with you to insure you are aware of our financial policies and your payment responsibilities. The following is a statement of Financial Policy:

Insurance

Your insurance policy is a contract between you and your insurance company. Lake Norman Pediatrics is not a party to that contract. Please become familiar with the terms and benefits of your insurance plan. As a courtesy, we will file all claims to your primary insurance company. Lake Norman Pediatrics will not become involved in disputes regarding co-pays or deductibles.

We expect a current copy of your insurance card. Please be advised that if your insurance changes, it is your responsibility to provide us with updated insurance information. **If you supply us with incorrect information or out of the time filing limit, we will hold you responsible for any unpaid charges.** All insurance carriers have a claims filing time limit.

Co-pays

As stated in the contract between you and your insurance carrier, all co-pays are to be paid at time of service. Co-pays will be collected prior to your appointment.

Self-Pay Patients

Self-pay patients are 100% responsible for all charges incurred and expected to make full payment at the time services are rendered. Should you need to make payment arrangements, please call and ask to speak with one of our Billing Associates. We will make every effort to reach a mutually agreeable budget plan.

Collections

We use an outside collection agency to collect on patient balances after they become past due over 120 days. We make several attempts to make payment arrangements prior to sending an account to collections. Once the account is sent to collections, the patient is subject to termination from the practice.

Labs & Procedures

Labs and procedures may be subject to deductibles. It is your responsibility to be familiar with your plan and benefits.

Transfer of Records

Lake Norman Pediatrics may use an outside company for copying and the transferring of records unless otherwise requested. This company is responsible for all copying fees and will bill you directly. Lake Norman Pediatrics is not responsible for this billing nor receives compensation for this service. Currently, the charge for this service is per page plus postage.

I hereby acknowledge that I have read and agree to abide by Lake Norman Pediatrics Financial Policy.

Signature of Responsible Party

Date