

Rainbow Kids Pediatrics Financial Policy

Payment is required at the time services are rendered unless other arrangements have been made in advance. This includes applicable coinsurance and co-payments for participating insurance companies. Rainbow Kids Pediatrics accepts cash, personal check, and most major credit cards. There is a service fee for returned checks of \$35.

Patients with an outstanding balance of 60 days overdue must make arrangements of payment prior to scheduling appointments.

Insurance:

We bill participating insurance companies as a courtesy to you. You are expected to pay your deductible and co-payments at the time of service. If we have not received a payment from your insurance company within 45 days of the date of service, you will be expected to pay the balance in full. You are responsible for all charges. We do bill secondary insurance companies as a courtesy to you.

Managed Care:

If you are enrolled in a managed care insurance plan (i.e. HMO), you must receive a referral from our office before seeing a specialist. NO retroactive referrals will be given.

Missed Appointments and Late Cancellations:

Broken appointments represent a cost to us, to you and to the other patients who could have been seen in the time set aside for you. Cancellations are requested 24 hours prior to the appointment. We reserve the right to charge for missed or last minute cancellations. Excessive abuse of scheduled appointments may result in discharge from the practice.

I have read and understand the Rainbow Kids Pediatrics Financial Policy. I agree to assign insurance benefits to Rainbow Kids Pediatrics whenever necessary. I also agree that if it becomes necessary to forward my account to a collection agency, in addition to the amount owed, I will also be responsible for the fee charged by the collection agency for cost of collections.

Signature of insured or authorized representative:

_____ Date: _____

Patient Name: _____ Patient DOB: _____