

# Hatch Pediatrics Financial Policy

The charges at Hatch Pediatrics are usual and customary for our specialty. The clinic strictly follows billing guidelines set by the federal government for the care we provide. We are bound by our agreements with insurance companies to precisely follow these rules. Each doctor is trained in the rules and carefully considers billing prior to submission.

Your insurance is a contract between your family and your insurance company. It is your responsibility to know your plan's coverage, restrictions and requirements. You will be billed for any applicable co-payments, deductibles and exclusions of your insurance contract.

Note that Hatch Pediatrics is a Preferred Provider Organization (PPO). Care at Hatch will not be covered if your insurance is a part of a Health Maintenance Organization (HMO). It is your responsibility to know if your policy is in network with Hatch Pediatrics.

We currently accept Medicaid/HMK, TRICARE, CHAMPVA and all commercial, PPO-based insurance (BCBS, Cigna, Aetna, UHC, EBMS, Pacific Source, MT Health COOP, Multiplan, Allegiance, Health Info Net). Accepted insurance is subject to change. We DO NOT accept reimbursement from health share programs.

Self-pay visits will be collected at time of service and charges will be discounted 20%.

Applicable co-payments will be collected at time of service.

We accept cash, check, Mastercard/Visa and Care Credit.

Partial payments will not be accepted unless otherwise negotiated. Balances that remain unpaid after 60 days may incur a 1.5% (18% APR) monthly interest charge.

NSF Checks are assessed a \$30 return check fee.

If a balance remains unpaid after the insurance claim is processed and no attempt is made to make payment arrangements after 60 days in arrears, your account will be referred to a collection agency. All costs of collection up to 50% of the balance, including attorney/court fees will be added to balance due.

Here is a sampling of our fees:

New Patient – Well Child Check	\$230 - \$282
New Patient – E/M (illness) Visit	\$156 - \$397
Established Patient – Well Child Check	\$210 - \$254
Established Patient – E/M (illness) visit	\$105 - \$320
Procedures (wart removal, sutures, foreign body removal, etc)	\$108-\$485

If your child is seen for a well child check-up (WCC) and there is an additional medical diagnosis, your doctor will bill for both the WCC and the additional diagnosis. Although the diagnostic care is provided on the same day as the WCC, each is considered distinct and acceptable by your insurance company. You may be charged a co-pay and/or deductible on the visit for the medical diagnosis portion.

If your child has to return to the office at a later date for an immunization, either because they are unwell at the time of their well child check-up, or because you defer getting immunizations on that day for another reason, they will be seen by a doctor for the follow-up visit. This means that immunization follow-up visits will incur a physician charge and may require co-pay or deductible.

By signing this document, you indicate that you have read and understand the above policy and had all your questions answered.

Child's name (print): \_\_\_\_\_

\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Date