

VILLAGE PEDIATRICS, LLC  
FINANCIAL POLICY

We thank you for choosing Village Pediatrics, LLC for the care of your children and we will strive to provide the very best care. In order to do so, this document has been prepared to acquaint you with our financial policies.

In order to better serve your needs, our office accepts numerous insurance plans, and every plan is different. It is up to **the insured** to know the exact requirements of their own insurance plan. In order for us to file insurance claims on your behalf, you must present active proof of insurance at the time of your child's visit to our office. Insurance information must be provided for each of your children. If you are not able to provide proof of insurance you must either pay in full at the time of service or you may choose to reschedule your visit. Newborn parents, you only have 30 days to sign your infant up for coverage. If you do not provide us with the proper information within 30 days we will bill you for any services from birth on and your insurance company will deny those claims making you responsible.

We will assist you in dealing with your insurance plan regulations: however, we will not be responsible if you do not follow the specific terms of your insurance agreement. Your benefits have been set according to your contract terms, and we must follow those terms exactly. Please do not ask us to provide services outside those terms, or to file your claims in any other manner, as we cannot do so. If you participate in an HMO and your card indicates that we are not your provider and you cannot provide proof that you have changed to our practice, you will be responsible for payment in full at the time of service.

We will be more than happy to file all insurance claims for you. However, when appropriate, if **your insurance company hasn't responded within 45 days**, full and prompt payment will be expected from you. If your insurance indicates that any service is a non-covered service you will be responsible for that amount. Please do not ask that those services be written off as they are deemed medically necessary and you will be billed

Fees due at the time of service include: insurance copays, deductibles, non-covered services or patients that are not covered by insurance. For your convenience we accept cash, check, Mastercard, Visa, Discover and American Express.

Our office will do whatever we can to assist you. If you have any questions or problems, please do not hesitate to contact our billing office at 913-642-2100, option 4, Monday-Friday 9:00-3:00pm.

Signed \_\_\_\_\_ Date \_\_\_\_\_