## **Financial Policy**

We are committed to providing you with the best care possible. This goal is best achieved if everyone is aware of the financial policy, which is an agreement between the doctors of the practice and the child's parent or guardian. Your clear understanding of the financial policy agreement is important to our professional relationship.

## Appointment Scheduling Policy

- 1) In compliance with Telehealth laws our providers will only be able to provide services if the patient is located at the time of service in the state the pediatrician is licensed in. If not the appointment will be rescheduled to the first available date with a pediatrician licensed in that state.
- 2) We value the time we have set aside to see and treat your child. We do not double book appointments. If you are not able to keep an appointment, we would appreciate 48-hour notice. There is a charge of \$30 for missed or canceled appointments without 48-hour notice.
- 3) If you are more than 15 minutes late for your appointment, we will do our best to accommodate you. However, on certain days it may be necessary to reschedule your appointment. Please notify our team if you are running late by calling (866)219-8595.
- 4) Our team will make multiple attempts to connect with you and remind you to complete the required paperwork for confirming your child's evaluation appointment. If the information has not been completed within 48 hours of selecting your appointment time, we will need to release this appointment on our calendar to ensure all families have flexibility in scheduling their virtual appointments. We apologize for any inconvenience and appreciate your understanding of our scheduling policy to ensure a great experience for all As You Are families.

## Insurance

- 1) It is the responsibility of the patient/parent to provide accurate and timely insurance information. Inaccurate or untimely information given to the staff that results in denial or noncoverage by your insurance company results in the guarantor being responsible for payment.
- 2) Insurance plans vary considerably, and we cannot predict or guarantee what part of our services will or will not be covered. An estimate of the patient responsibility portion may be provided prior to services rendered if requested, although true balance due may differ after the insurance processes the bill.
- 3) You are responsible for any and all co-payments, deductibles, coinsurances, and non-covered items up to the full billed amount. All insurance carriers have a fee schedule from which they will reimburse. However, the provider's fee may be higher than what the insurance company reimburses, or it may not be a covered service. Therefore, any balances not covered by insurance becomes the responsibility of the patient/parent.
- 4) Balances due will be charged to the credit card on file within 15 days of receipt of your insurance plan's explanation of benefits.
- 5) All services performed will be submitted as a courtesy to your insurance.

## **Financial Responsibility**

- 1) Insured Patients: Patient balances are charged to the credit card on file within 15 days of receipt of your insurance plan's explanation of benefits.
- 2) Self-Pay Patient: Patient balances are charged to the credit card on file within 1 day of the completed appointment. A good faith estimate will be provided upon request.
- 3) A \$30 fee will be charged for all credit card transactions that are declined. Same fee applies for returned or insufficiently funded checks.
- 4) If previous arrangements have not been made with our billing office, any account balance outstanding longer than 180 days may be forwarded to a collection agency.
- 5) The parent or adult signing this consent is financially responsible for any balances due. In case of divorce, please do not place our office in the middle of marital disputes. It is your responsibility to work out the payment of your child's medical care between the custodial and noncustodial parent.
- 6) We realize that temporary financial problems may affect timely payment of your account. If such problems arise, we encourage you to contact our billing department promptly for payment arrangements and assistance in the management of your account.

Phone: (866) 219-8595

Fax: Available upon request.

Email: support@asyouare.com

We're here if you have any questions. Email us at support@asyouare.com or call (866) 219-8595.

I HAVE READ AND FULLY UNDERSTAND THE FINANCIAL POLICY SET FORTH BY AS YOU ARE. I AGREE THAT IF IT BECOMES NECESSARY TO FORWARD MY ACCOUNT TO A COLLECTION AGENCY, I WILL ALSO BE RESPONSIBLE FOR THE FEE CHARGED BY THE AGENCY FOR THE COSTS OF COLLECTION IN ADDITION TO THE ORIGINAL AMOUNT DUE. I UNDERSTAND AND AGREE THAT THE TERMS OF THIS FINANCIAL POLICY MAY BE AMENDED BY THE AS YOU ARE AT ANY TIME WITHOUT PRIOR NOTIFICATION TO THE GUARANTOR.

[I Agree]