

Office and Financial Policies

We are pleased you have chosen Advanced Pediatrics for your child's medical home! We appreciate your cooperation in following our office and financial policies so that we may continue to provide the very best care to our patients. Our staff is always ready to assist you with any additional questions or concerns you may have.

NEW PATIENTS: If you are transferring care from another practice, please request that a copy of your child's medical records be sent to us. There should be no charge to you for this service if the records are sent directly to our office. You may download an **"Authorization to Release Records"** form from our website for this purpose. Please bring a copy of your child's immunization record to the first visit.

New patient forms may be found on the **"New Patients"** page of our website at:

www.AdvancedPediatricAssociates.com

Medical records should be sent to:

**Medical Records
Advanced Pediatric Associates
3300 South Parker Road, #404
Aurora, CO 80014**

NEWBORNS: Please make sure that you add your new baby to your insurance policy within 30 days of birth to ensure coverage and select one of our physicians as your baby's primary care provider if a PCP is required. Be sure to bring any hospital records regarding your baby's health (including Hepatitis B vaccination and newborn screen) to your first office visit.

APPOINTMENTS: Our centralized scheduling department makes it easy to schedule an appointment at any of our offices. Please call us at **303-699-6200** and choose **option #1** to speak with one of our schedulers. **Our phone lines are open from 7:30 a.m. – 5 p.m. Monday through Friday. Saturday phone hours are 7:30 – 11 a.m.**

- ◆ Our phones are busiest from 7:30 – 9 a.m. in the mornings. If you are calling for a well care appointment, please consider calling later in the day to reduce your wait time.
- ◆ Please call during business hours to cancel or reschedule an appointment. Our after-hour service does not take messages regarding scheduling.
- ◆ If you are unable to keep an appointment, we request that you contact us as soon as possible so that we are able to offer that appointment time to another patient. Multiple no-shows for a family will result in discharge from the practice.
- ◆ Please be on time for your appointment. We request that you arrive 5 - 10 minutes early to allow time for check-in. Make sure you have your insurance card and necessary copayment.
- ◆ If you are late for a well care appointment, we may require that it be rescheduled to ensure that our providers stay on schedule for the next patient.
- ◆ We are open on Saturday mornings for acute (sick) care visits and newborn care. Please be aware that there is an additional charge of **\$25** for Saturday acute care visits.

MESSAGE AND CALL BACK POLICY: We strive to provide excellent customer care and want any questions or concerns to be attended to in a timely manner. Our message and call back policy is designed to respond appropriately to phone messages, while allowing our providers to give the focused care patients need during office visits.

- ◆ To leave a non-urgent message for a provider, call our Patient Care Line at 303-699-6200 and choose option #1. A care coordinator will assist you with leaving a message. **Please note that it may be 24 - 48 hours before non-urgent messages are returned.**
- ◆ If your child is sick or your message requires a more urgent follow-up, your call will be transferred to one of our registered nurses who will assess your child's illness and discuss recommendations for care with you.
- ◆ If you are calling because your child's symptoms have not improved, you will be asked to schedule a follow-up appointment so that we may examine your child and reassess the situation.

PRESCRIPTION REFILLS: If refills are remaining on your prescription, please contact your pharmacy. If no refills are left, you may submit a request for additional refills over the phone or through *MyChart*. Please allow 48 hours for your refill request to be processed.

To Request Additional Refills Call: 303-699-6200, option #3, or direct line at 720-870-0244

Or Request Online with MyChart: <https://mychart.childrenscolorado.org/advancedpediatricassociates/>

- ◆ Our prescription refill policy is designed to provide responsible health care for our patients. While some drugs prescribed for ongoing or chronic care may be refilled **if your child is current on well-care and / or follow-up exams**, most acute care medications will require an office visit to further assess your child's condition and the need for continuing medication.
- ◆ **ADHD medications will not be refilled unless a patient is current on ADHD follow-ups and well care visits and must be picked up at one of our offices with proof of identification.**
- ◆ **Please note that our on-call physicians do not prescribe or refill medications over the phone.**

REFERRALS TO SPECIALISTS: As your child's primary health care provider, we attempt to provide the majority of health care needs in our office. In those cases where a specialist referral is appropriate, Advanced Pediatrics has a referrals department that works in conjunction with our providers to coordinate referrals to specialists. Once a provider orders a referral, our referrals department will contact your insurance and request authorization if an authorization is required. Once your insurance responds, you will be notified by either the specialist or our referrals department with authorization and specialist information. **This process normally takes 4 - 5 business days. For emergency referrals, most insurances respond within 24 hours.** To contact the referrals department, please call 303-699-6200, option #4, or 720-974-7188.

LAB AND X-RAY RESULTS: It is our goal to call patients with lab and x-ray results as soon as possible. If we have been unable to reach you or if you have additional questions, please feel welcome to call our lab / x-ray line at 303-699-6200, option 5, to leave a message for a return call. **Please note that some lab results can take up to 7 days to complete.**

MY CHART: We encourage all patients to sign up for *MyChart*, our online patient portal. *MyChart* makes it convenient for parents to access immunization records, request prescription refills, view lab results, and communicate with our staff. Learn more about *MyChart* on our website or ask our reception staff for an activation request card to set up your account.

MEDICAL RECORDS AND FORMS: We complete most forms at no charge to our patients, however there may be a charge for more complex forms. **Please note that most sports or camp forms require an up to date well care exam.** You may leave forms at any of our offices for completion, and we will contact you when the form is ready to be picked up **(please allow 2 business days).**

A copy of your child's immunization record will be provided to you at each well-care visit with immunization updates. Additional copies may be requested online on *MyChart* or by calling our medical records department at 303-699-6200, option #6 **(please allow 2 business days).**

Transfer or copying of medical records requires a signed release form from the parent or the patient (if over 18). If records are being sent to another physician, we will copy and send them at no charge. Records copied for personal use will incur a copying charge. Please contact our medical records department at 303-699-6200, option #6 to request an **"Authorization to Release Records"** form (or download it from the **"Online Forms"** page of our website), and **allow a minimum of 5 business days for processing.**

CONFIDENTIALITY: **Advanced Pediatrics fully complies with HIPAA regulations and our privacy policy has been made available to all patients.** Parents of adolescents should be aware that Advanced Pediatrics complies with state and local laws in providing health care to adolescents. While our providers strongly encourage ongoing communication between teens and parents, we are bound by state and federal laws governing a teen's right to confidentiality regarding sexuality, substance abuse and certain mental health issues. **For more information regarding adolescent confidentiality laws, see the "Adolescent Health" page of our website.**

OFFICE PROTOCOL: In order to keep our offices clean, **food and drinks are not allowed in our reception area or exam rooms.** We need your full attention at your child's visit and **request that you do not use cell phones in our office.** You will be asked to turn your cell phone off if this becomes a problem.

Financial Policies

Our business relationship with you is an important part of serving as your **"medical home"**. Accordingly, we have developed financial policies that we believe are transparent, fair and patient-friendly. For more information regarding our financial policies and understanding healthcare insurance, visit the **"Financial Policies"** page of our website. Key components of our financial policies are outlined below:

GUARANTOR: You will be asked to identify **one** person who is responsible for coordinating your child's pediatric care with us. This is the person we will normally communicate with regarding clinical or financial issues, although other adults may be authorized to bring your child to a visit or may carry health insurance for your child. **The Guarantor is the person who will receive billing statements from our office. Please note that a divorce decree or other financial arrangement between two parties does not determine who APA bills for services. We will bill the appropriate insurance, but will invoice the Guarantor for any balances remaining.**

OUR CHARGES: Our charges have been developed to be consistent with usual and customary charges in the community. **Payment is expected for all services provided by our staff, including charges for immunizations, in-house lab work and medical supplies.** In an effort to provide the most comprehensive care available to our patients, we make a number of services available to our patients at no cost, including our Nurse Line, After Hours Service, and the completion of most medical forms. Our Nurse Line and After Hours Service can often save you valuable time and money by recommending the most appropriate care for your child.

- ◆ Please be aware that if any **outside lab or x-ray services** are required, you will receive a **separate bill** for those services from the lab or x-ray provider.
- ◆ For well care visits, some screenings and lab tests are considered **separate billable procedures** from the actual well care visit by insurance companies, and may require an additional copayment or may not be covered by your insurance plan.
- ◆ If a well care visit also includes an acute care problem or issues that are outside the scope of normal preventive care, your insurance company may charge a copay or deductible for these **"additional issues."**
- ◆ **Please be aware that there are additional charges of \$50 for urgent visits and \$25 for Saturday acute care visits.**

PAYMENT: We accept most commercial insurance plans, as well as Tricare, Colorado Access, and CHP+, although we may not be "in-network" on all plans. We accept Medicaid insurance for current patients only. **We require payment in full at time of service for patients without insurance or if we are unable to verify current eligibility.**

- ◆ In addition to cash and check payments, we accept VISA, MasterCard, Discover, and American Express.
- ◆ Secure credit card and electronic check payments may be made online on the **"Online Forms / Payments"** page of our website at: www.AdvancedPediatricAssociates.com

COPAYMENTS:

- ◆ Many insurance plans require that the patient share in the cost of the visit by paying a copayment. Copayments are due at the time of the visit.
- ◆ Certain procedures, labs or screenings may require an additional copayment based on insurance plans. **APA cannot guarantee that all services provided at time of visit will be covered under one copayment.**
- ◆ The adult accompanying a minor patient is responsible for paying the copayment at the time of visit.
- ◆ Non-payment of copayments may result in billing charges, collection activity, and discharge from the practice.

RETURNED CHECKS: We have a \$20 returned check charge for any checks returned to us by your financial institution as non-paid.

Please feel welcome to contact our Patient Financial Services office at 720-870-4740, option #1, with any questions you may have about our financial policies or your account.

INSURANCE: To avoid unexpected charges, it is important for you to fully understand your insurance coverage benefits and limitations. **Your insurance policy is a contract between you and your insurance company; we cannot modify coverage, copayments or deductibles.**

- ◆ Please use your child's legal name for all insurance and medical records.
- ◆ **If your insurance requires a PCP (primary care provider), it is your responsibility to designate one of our physicians as your PCP with your insurance company. We cannot bill your insurance if we are not listed as PCP.**
- ◆ In order to bill your insurance company for services provided, it is critical that we have current insurance information in our records. **We will ask for your current insurance card at each visit to ensure that our information is correct.**
- ◆ If you have a deductible or health savings account plan, there may be a patient balance after the insurance company has paid their portion of the bill. We will bill you for this balance due and request payment be made within 30 days.
- ◆ **It is your responsibility to know the benefits and exclusions provided by your insurance plan, including copayment amount, coinsurance, and deductible, as well as the effective and expiration date. Not all services provided by our office are covered by all plans.** In all cases, the Guarantor of the account will be charged for any service not covered by the patient's insurance plan.
- ◆ **It is your responsibility to make sure Advanced Pediatric Associates is a participating healthcare provider (in network) for your insurance plan.** Increasingly, insurance companies are selling plans that have a narrow network of providers and will not provide benefits if you go "out of network."
- ◆ If you have two insurances, we will bill the primary insurance and the secondary insurance. We request that you provide all necessary insurance information to our office and promptly respond to insurance company requests to assist us in this coordination of benefits process.
- ◆ Your insurance company may request additional information from you before they process claims. Please respond promptly to these requests. Failure to respond to insurance company requests may result in unpaid or denied claims, in which case the Guarantor becomes fully responsible for these charges.

PATIENTS WITH NO INSURANCE / SELF PAY:

- ◆ Payment in full is due at time of service.
- ◆ APA works in cooperation with the Children's Hospital Colorado residency program and provides appointments with a resident physician at a 50% discounted rate (office visit portion only - does not include immunizations, lab work or medical supplies) for patients with no insurance.
- ◆ Patients with no insurance are eligible to receive vaccines within our office from the nationally funded "Vaccines for Children (VFC)" program, at a cost of \$20.00 per immunization.

PAST DUE BALANCES AND COLLECTIONS:

- ◆ If you have a past-due balance on your account, you may be reminded of this when calling to make an appointment and will be asked to bring this payment with you to your next appointment.
- ◆ Past due accounts greater than 60 days are subject to third party action and potential discharge from the practice. Accounts sent for collection action will be assessed a \$30 collection charge.
- ◆ If you need special payment arrangements, please contact our Patient Financial Services department at 720-870-4740. We are able to provide short-term payment plans for emergency situations.
- ◆ **Our collection policies are fair but firm.** We will never deny access to necessary medical services for our patients due to financial issues; however, patients may be discharged from the practice due to non-payment for medical services received. If a patient is discharged from the practice for financial reasons (including bankruptcy), we will give 30 days notice and provide emergency care during the notification process. In addition, these accounts may be turned over to an outside collection agency.