Pediatric & Adolescent Medicine, LLP



Financial Statement

We have direct financial relations with a limited number of insurance companies. We accept patients with most plans with Cigna, Oxford, United Healthcare, Blue Cross Blue Shield and AETNA. We will bill these insurance companies directly for those patients enrolled with these plans. Please note, however, that arrangements with insurance companies are subject to change at any time. You agree to provide accurate and prompt information concerning your health insurance plan.

You agree to provide prompt notification of any changes to your insurance plan or coverage such as increased co-payment amounts, change of policy number, etc.

We MUST have your insurance information at the time of your visit in order to ensure our participation. If your insurance is a plan with which we do not participate, YOU ARE RESPONSIBLE FOR PAYMENT OF SERVICES AT THE TIME SERVICES ARE RENDERED. Upon complete payment of services, we will provide you with a detailed summary of charges to submit to your insurer for your reimbursement.

You are responsible for any co-insurance, deductible and co-payments based on your plan .This includes patient responsibility applied to any telephone encounters rendered by the providers. If your insurance requires you to pay a co-payment, this MUST be done at the time services are rendered in order to avoid an administration fee of \$25.

Effective September 1, 2022, we will charge an annual Administrative Fee to cover these non-reimbursable administrative tasks and services. This allows us to continue to provide the most up to date services while remaining a small, personal, and accessible office.

The Administrative Fee allows us to optimize the wellness of your family by continuing to provide the following services:

- Urgent care appointments available each day, striving to see each patient who calls in for a sick visit as soon as possible
- Prescription refill requests
- Electronic prescriptions sent directly to the pharmacy
- Insurance prior authorizations
- Coordination of care with specialists
- Unlimited medical record copies
- Patient Portal access, messaging, and emails
- Health Forms (eg: for daycare, school, camp)
- Evening and weekend hours
- After-hours urgent medical advice with triage nurses and providers
- Participation with a wide selection of insurance companies for all our families
- Compliance with new regulations and liabilities impacting workplaces and front-line healthcare workers
- Additional investments in clinical and practice management areas that make care access easier, recognizing the multiple ways in which our patients may choose to access care for their families
- HIPAA compliant digital forms providing easy access, faster completion, and secure delivery right back to your email

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This Administrative Fee is above and beyond your customary insurance payment for services rendered. Unfortunately, your insurance will not pay these fees. However, if you have a Flexible Spending Account (FSA), it may be covered. We recommend that you contact your internal benefits manager or administrator to confirm.

The Administrative Fee is \$250 for the first child annually, plus an additional \$50 per child annually to a family max of \$400 per year.

It is your responsibility to understand your benefit plan. It is your responsibility to know if a written referral or authorization is required to see a specialist if preauthorization is required prior to a procedure and what services are covered.

You understand that you are financially responsible for any services that are not covered by your insurance plan.

I have read the above information	n and understa	and my financial obligations.	
of Patient	Relationship to Patient		_ Name
or ration	relationship	to i attent	
Signature of Parent / Guardian	Date	Name of Parent / Guardian	_

Updated 08.2022