

Billing Information

Surf Pediatrics and Medicine follows and agrees with the American Academy of Pediatrics and American Academy of Family Physicians recommendations that you as a patient receive regularly scheduled well visits and routine follow ups for any chronic conditions.

Due to the new and continuing changes in health insurance, our billing department has had many phone calls from patients questioning their bills and charges. We have developed this informational sheet to educate you and your family on what to expect at your visit.

Know your insurance plan: with health savings accounts and high deductible plans, you need to check your benefits are and what it covered:

- Does your plan cover well care visits?
 - Does it cover well care visits 100%?
 - Are there restrictions to vaccine coverage?
 - Does your plan cover sick and follow up visits?
 - What is your copay and deductible?
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- If you have any changes to your insurance policy, please let us know and get us the updated information as soon as possible.
 - If your child has **Medicaid** – we **MUST** be on your card as your primary care provider.

Newborns: We ask that you add your newborn to your insurance plan ***within 30 days*** of birth. Surf Pediatrics and Medicine follows the AAP guidelines which recommend that your baby is seen within 48 hours of being discharged from the hospital. This visit is considered a “well visit” and is most often covered by insurance as a well visit. We then see newborns back in a week for a weight check, to make sure they feeding okay and gaining weight properly, these visits are considered a follow-up and your copay or deductible will be applied.

NOTE: Please make sure you add your newborn to your insurance plan as soon as possible. It **MUST** be done *within 30 days*.

Charges:

- We charge for all services/procedures performed by our providers.
- We do not charge for after hours Triage calls at this point.

- Please be aware any outside labs or radiology that may be required, you will receive a separate bill from those facilities.
- After a second “No Show” visit there will be a \$25.00 charge – our cancellation policy is 24 hours prior to appointment time.

Payments:

- Payment is expected in full at the time of service unless the service is covered 100% by insurance. Failure to pay can result in the rescheduling of your appointment.
- If you are self-pay, payment is due at the time of service.
- Copays are due at the time of service (Please remember we do not set your copay amount. Your copay amount is contracted between you and your insurance carrier, we are not allowed to waive copays).
- If you are seen for a f/u or new problem in addition to your physical a copay or coinsurance will be applied.
- In the case of divorce or separation, the parent authorizing treatment for the child will be responsible for all charges. Note: Please have the child's insurance information, even if you are not the holder of the policy.
- Make sure you know your plan and what it will cover, so you are aware of payment responsibilities of charges not covered by your insurance.
- For any Health Savings accounts payment is expected within 30 days after insurance has processed your claim.

Our billing team is available anytime to answer questions or help you understand your insurance policy. Call the office at 252-255-5321