

## Thank you for choosing us as your Pediatrician we greatly appreciate that you have put your trust in our practice.

In effort to keep your medical costs down, we ask that you pay your portion of the bill at the time of service, if your insurance has a

- Co-pay: It must be paid in full at the time of service
- **Deductible**: We collect \$70 at the time of service, once your deductible has been met we will balance bill you the co-insurance
  - All HSA card holders will have to pay \$45 towards deductible on the date of service to avoid having a high balance on account.
- Family Balances: Must be paid if your child is here for a well visit, if you are unable to pay and your child is sick, we will NEVER turn you away with the exception if your account has been turned over to the collection agency.

If you ever have any concerns regarding your child's account or insurance plan please do not hesitate in contacting Christine in our billing department at email at pcpbilling@bellsouth.net

## Missed appointments or cancelations less than 24 hour notice

Missed appointments and cancellations with less than 24 hours notice, increase the cost of medical care for everyone. In this challenging economic time in our country we all need to work together to improve on healthcare efficiency and thereby reduce the cost for all of us and make more appointments available for everyone. When appointments are missed it works against this objective. When a family misses appointments, this includes being 30 minutes late to scheduled appointment without a call and by failing to call 24 hours prior to the appointment to cancel; a \$25.00 fee will be charged.

No Show or Cancellations during COVID19-Adjusted Hours \$50 fee

Telemedicine Missed appointments \$10 fee

Thank you for your cooperation ©

-Personal Care Pediatrics