



PEDIATRICS 5280, PC

**9094 E. Mineral Ave. Suite 120
Centennial, CO 80112**

**2352 Meadows Blvd. Suite 150
Castle Rock, CO 80109**

**Phone: (303) 779-5437
Fax: (303) 689-9628**

Billing and Financial Policy Update-January 1, 2016

Insurance issues, requirements and coverage are ever changing. We are making every effort to be in compliance and to eliminate payment denials before they occur. Your insurance plan may or may not cover routine preventative services (i.e. Your well child exam/physical).

We are legally obligated to assign procedure codes based on the actual service provided to your child, whether it is a well child exam or a visit to care for any other health problem or procedure. When these occur at the same appointment they must be treated as individual services. We also are not allowed to change the coding at any time to cause the insurance company to pay for a non-covered service.

****Based on the type of coverage you have, some or all of this cost maybe billed to you.****

Please keep in mind that while the appointment scheduled may be just for a well child exam/physical or for a health problem or procedure, if both types of services are provided during a visit, then both services will be billed. **When both services are billed, you will be responsible for paying a co-payment or any amount applied to your deductible for the portion of the visit pertaining to the health problem or procedure, depending on your insurance coverage.** Please be aware that we are willing to schedule these visits together as a convenience for you, but if you would prefer separate visits, we are able to accommodate that as well.

Patient Name(s)-please list all family members that are patients at Pediatrics 5280, PC (If need be list more than one patient per line):

Name(s): _____ Date(s) of Birth: _____

Name(s): _____ Date(s) of Birth: _____

Name(s): _____ Date(s) of Birth: _____

Name(s): _____ Date(s) of Birth: _____

Name(s): _____ Date(s) of Birth: _____

****In addition, I acknowledge that I have received Pediatrics 5280's Notice of Privacy Practices.**

Patient/Parent Signature

Date