

# Billing 101

The providers of Jeffers, Mann and Artman Pediatrics strongly agree with the AAP recommendations that your child receive regularly scheduled checkups and routine follow-up of chronic conditions such as asthma or ADHD. These visits may include developmental forms, routine labs, and testing of hearing and vision.

Due to all the changes in the health insurance industry, our billing department has many calls from parents with questions regarding their bills and charges incurred during a “checkup” or “sick visit”. We have developed this informational sheet to educate our families on what to expect at the time of your visit. We ask that you read and sign stating that you understand.

**Know your insurance plan** – with higher deductible and health savings accounts, check your insurance policy for limited benefits such as:

- Does your plan cover well care visits?
- Does your plan cover sick visits?
- Are there restrictions to vaccine coverage?
- What is your copay & deductible? 100% well check coverage?
- What coverage does your plan have for in-office labs?
- What coverage does your plan have for after-hours care?



- ✓ If you have changes in your insurance it is important to update this information with us as soon as possible
- ✓ Please make sure you add your newborn to your insurance plan *within 30 days*
- ✓ Medicaid & NC Health Choice – we must be the assigned provider on your card

**Newborns** – We follow the AAP guidelines which recommend that your baby is seen for a follow-up visit within 48 hours of your discharge from the hospital. Typically, this first office visit occurs at 3 to 5 days of age. This visit is generally scheduled as a “well visit” and is now most often covered by your insurance carrier as a well check-up. At this visit we check that your baby is starting to gain the weight that he or she lost initially, check how your baby is feeding, and look for signs of jaundice. This visit also gives us the chance to answer any questions that you may have. If your baby is diagnosed with jaundice or any issue other than normal newborn well check, this visit may be billed as a sick visit or as a combination “well”/“sick” visit. In this case, your copay or deductible may apply.

**NOTE:** Please make sure to add your newborn to your insurance policy as soon as possible (your baby **MUST** be added within 30 days)

**Well checks** - During check-ups for all children:

- Measure height, weight and head circumference (depending on age) and plot them on a growth chart
- A body mass index (BMI) is calculated for all children 3yr and older
- Check body parts and systems
- Discuss age related expectations and guidance
- Discuss age appropriate nutrition
- Discuss schooling (if age appropriate)
- Fill out forms for daycare/sports
- Refill Medications



Other concerns that are more complicated and involve more time or

expertise such as chronic (prolonged duration) headaches, stomach pains, psychological/school problems, ADHD recheck, asthma rechecks or other medical issues usually require a separate code and charge in addition to the check-up. Addressing these concerns during your well check may result in your being charged for a sick visit in addition to your well visit. Your insurance company will apply a co-pay/deductible for the sick visit. If you would prefer, we will schedule a separate visit to address any chronic issues.

#### **Charges -**

- We charge for all services/procedures performed by our providers
- We charge \$10.00 for after hours Triage call. We do *NOT* charge for calls regarding patients two (2) months and younger. Also, you will *NOT* be charged if your child is referred to an Emergency Room
- There is an after-hours charge of \$40.00 for Evening/Saturday/Sunday visit. (This charge may or may not be covered by your insurance carrier.)
- After the second "No Show" visit there will be a \$25.00 charge.
- Please be aware that if any outside labs or x-ray services are required, you will receive a separate bill from those facilities.

#### **Payment -**

- ✓ Payment in full is expected at the time of the visit unless the service is covered by insurance. Failure to provide payment at check in could result in your appointment being rescheduled.
- ✓ If you are self pay or have a high deductible plan we will provide you with an estimate of your charges, payable in full at time of service.
- ✓ Patients are responsible for paying co-pays, co-insurance and/or deductibles at the time of service. (Please remember that we do not set your copay amount. Your copay is contracted between you and your insurance carrier. Per our contract with your insurance company, we are not allowed to waive or reduce copayments.)
- ✓ In the case of divorce or separation, the parent authorizing treatment for the child/children will be the parent responsible for all charges.
- ✓ Please make sure you know your plan so there are no surprises as you are responsible for payment of charges not covered by your plan. The care we provide during these visits is done in the interest of your child's current and future health regardless of insurance/payment issues and we do not recommend postponing or omitting any labs, tests or evaluations.
- ✓ HSA/ HRA / FSA or any Health Savings account – available balance will be verified and payment is expected within 30 days after insurance has processed your claim. If unable to verify available balance payment is expected at time of service.



**Jeffers, Mann & Artman Pediatric**  
and Adolescent Medicine, P.A.