

MERCY CHRISTIAN HEALTH Financial Policy

At **Mercy Christian Health**, we desire to provide the best possible medical care for your child, teenager, or young adult. Our goal is to offer competent, compassionate and comprehensive medical care. We take that responsibility seriously, and are constantly seeking ways to optimize your medical care through continuing medical education and practice management seminars. We also feel it is responsible business policy to clearly communicate our financial expectations with you. If you have any questions regarding this financial policy, please do not hesitate to speak with our Office Manager. We consider it a privilege that you have chosen Mercy Christian Health as your health care provider.

PAYMENT FOR SERVICES RENDERED

All payment is expected at the time of service. If we do not participate with your health insurance plan, you are responsible for the full payment at the time of service. If you do not have any health insurance, please speak to our Office Manager about an adjustment.

We currently participate with most of the major health plans as well as with Medicaid. Please contact your insurance company to verify coverage.

Your insurance plan requires that you must present your insurance identification card(s) at each visit to ensure correct billing and eligibility information. If your insurance card lists the primary care physician, it must list one of our physicians in order for your child/teen/young adult to receive medical care at Mercy Christian Health.

All copays are to be paid at the time of service. This policy has been set by your health insurance plan and should be stated in your policy manuals. If the copay is not paid at the time of service, a \$5 billing fee will be added to your account. We can no longer bill secondary insurance companies for copays. We will, however, provide you with the necessary paperwork to submit to your secondary insurance for reimbursement. If you have any questions regarding the copayment amount, please contact your insurance plan. If you have a deductible, please be aware when you have met that deductible to avoid confusion about who is responsible for your bill.

Everyone should obtain a summary of covered benefits from their insurance provider. This explains what is covered by your insurance and what is excluded (not covered). It is very important to read this because it will tell you if preventative care exams (well child exams or physicals), immunizations, referrals, or ill visits are a covered benefit. It will also tell you what your office copay will be at the time of your visit, and outlines your pharmacy and hospital copays and coverage. If it is not clear from your insurance policy manual, please call your insurance representative and ask them for a summary of covered benefits. We have seen some nice easy-to-read 1-2 page summary sheets and we encourage you to request this for your own knowledge. Each insurance company has hundreds of options, and we are unable to keep track of each patient's unique coverage. We need your help in being aware of your particular health plan.

Copayments must be made at the time of service, regardless of who brings the patient to the office. The person accompanying the child must provide the payment. In situations with children of parents who have divorced, it is the responsibility of the parent who brings the child/teen/young adult for treatment.

METHODS OF PAYMENT

We accept the following forms of payment: cash, personal check, or credit card (Visa, MasterCard, Discover, or American Express). Please note that a service fee of \$25.00 will be assessed for all checks returned for insufficient funds. We also accept payment online through the patient portal.

FINANCIAL HARDSHIP

If you are facing financial difficulties, please call the office to make special arrangements. We understand that each of us may have a period of financial difficulty and we are very willing to set up a payment plan so that your child/teen/young adult can continue to receive medical care at Mercy Christian Health.

OVERDUE PAYMENTS

If you have not made special arrangements with the office and charges remain unpaid 60 days after the date of service, we will consider your account past due. When your account is past due (60 days) you must make arrangements with the Office Manager before scheduling well child appointments or physical exams. Some form of payment will be expected at the next visit.

Accounts over 90 days past due will be considered seriously delinquent and will be referred to our collection agency. Failure to pay for services already provided may result in discharge from our practice if arrangements have not been made with the office.

If we have been unable to resolve your claim with your insurance company within 60 days of the date of service, we will notify you and ask that you check into that delay. If the claim is still unresolved after 90 days, we will request payment in full from you directly. You are ultimately responsible for all charges.

NEWBORNS

It is essential that you enroll your newborn infant with your insurance carrier or Medicaid if applicable, within 30 days of the child's date of birth. If your child is not enrolled, your child will not be covered. If you fail to do this within 30 days following the birth of your child, we will bill you directly for the services provided.

AUTHORIZATION FOR MEDICAL CARE

If your child/teen/adolescent is under 18 years of age, he or she must be accompanied by a parent or legal guardian. If this is not possible, an adult who has obtained a written consent from you may accompany your child. The consent should give the adult permission to seek medical treatment for your child and it must be signed and dated by a parent or guardian. The consent needs to mention if vaccines can be given or not. The consent must be presented at the time of service. An exception to this is an adolescent presenting for confidential services, which are permitted by the State of Michigan to provide without notifying the parent.

REFERRALS

Many insurance plans require a member receive a referral from the primary care physician (PCP) before seeing a specialist. Even if your plan does not require a referral, we highly recommend you speak with us before seeing a specialist. Your insurance plan may have a limited number of providers to choose from and we can help identify the ones who have special expertise in dealing with children/teens/adolescents. Your child's best interests are served when there is communication between the pediatrician and the specialist. Also, our referral specialist must have the necessary information in order to process the appropriate paperwork so that your child's visit to the specialist will be covered by your insurance company. When choosing an insurance plan for your children make sure that your plan allows your children to be hospitalized at a children's hospital and to see pediatric specialists or sub-specialists as they have been specially trained to care for children and their unique illnesses.

MISSED APPOINTMENTS AND CANCELLATIONS

Missed appointments are very costly to us, to you, and to other patients who could have used the time set aside for your child. Cancellations are requested at least 24 hours in advance. This will allow our office time to give appointments to patients on the waiting list or to have available time for sick visits. A fee of \$25 will be charged for a No Call No Show.

You will receive a reminder call 1-2 days prior to your appointment to the primary phone listed on your contact sheet.

Our "No Call No Show" policy states that after 3 "no shows", you family may be discharged from our practice. Or, you may not be able to schedule an appointment – just come as a walk in and you will be seen if time allows.

FORMS FOR SCHOOL, CAMP, SPORTS, OR DAYCARE

This is a new policy at Mercy Christian Health which we established because of the tremendous amount of staff time required for completing the many forms requested. We will give you a school/camp/sports/daycare form at the time of service. Please keep the original and photocopy it for anyone requesting a health form. Requests for forms will be processed within 24-48 hours after the request.

Note: Sports physicals must be completed **AFTER** April 15 of the school year. We will not alter any dates on physical forms.