

WK CENTER FOR PEDIATRICS-SOUTH

2518 Bert Kouns Industrial Loop
Shreveport, LA 71118
(318) 212-5437 Office, (318) 212-5825 Fax

We welcome you to our clinic and thank you for choosing our doctors. It is our hope to provide you with the best care possible and in order to help you understand our office policies, we are providing you with the following information.

PAYMENT AND INSURANCE POLICY

Our doctors participate in most insurance plans. **Patients are required to furnish proof of insurance at the time of service.** We verify all insurance coverage and will let you know what we believe your responsibilities to be at the time of services. All insurance companies have a disclaimer and we can not guarantee payment by them for services rendered.

Co-payments for HMO's, PPO's and other managed care plans must be paid at the time of service. Billing patients for their co-pays is a violation of many managed care contracts and will not be allowed. **Co-pays will be collected at check-in before the physician sees the patient.** If the patient does not have the co-pay at the time of the visit, the appointment will need to be rescheduled in order to meet the co-pay requirements. **Our office can not accept any bills larger than \$20.00.**

There will be a \$30.00 charge on all NSF checks that are returned.

All patients who have annual deductible amounts or charges that are not covered by insurance, will be the obligation of the guarantor and due at the time of the visit. If the patient has met his/her deductible for the current year and can verify this with an Explanation of Benefits from the insurance carrier, we will accept their percentage part.

Monthly statements are generated and mailed to patients/guarantors to make them aware of any outstanding balance after insurance coverage has been exhausted. **Any outstanding balance is considered the guarantor's regardless of insurance coverage. WE DO NOT DO ANY THIRD PARTY BILLING FOR MOTOR VEHICLE ACCIDENTS, SPORT INJURIES, OR ANY OTHER ACCIDENTS.**

An account will be deemed delinquent after 60 days from the date of service or from the date services were denied or paid by the insurance carrier.

APPOINTMENTS

The office goes by appointments only. **Walk-ins are not accepted.** If your child needs urgent care, please call and we will advise you so your child gets the appropriate care within a reasonable time.

NEWBORN PATIENTS

ALL parents must call and add their newborns to their insurance plan. **INSURANCE COMPANIES ONLY ALLOW 30 DAYS TO DO THIS.** If your newborn is not added within the limit set by your insurance company, then the doctors services at the hospital may not be covered. **PATENTS ON PPO, HMO, AND OTHER CO-PAY PLANS: If you do not have proof of coverage, you will be responsible for the total amount charged.**

TELEPHONE POLICY

Telephone calls received in the A.M. will be returned during the lunch hours. If you have not received a return call by 2 P.M., please call back. Telephone calls received in the P.M.

will be returned before the doctor and nurse leaves for the day. If you think your child may need to be seen on the day you call, please go ahead and make an appointment.

**IF YOU CHILD HAS A TRUE EMERGENCY----- CALL 911.
ALL AFTER HOUR TELEPHONE CALLS SHOULD BE LIMITED TO
URGENT CARE ONLY. WE DO NOT REFILL ROUTINE
PRESCRIPTIONS OR GIVE TEST RESULTS AFTER HOURS.**

REFERRALS

Referrals must be pre-approved by the physician and a 48 hour notice should be given. we require **72 hours** for any paper work to be filled out by the doctor or nurse.

MEDICAL RECORDS

Transfer of all medical records require a written consent that is current with HIPAA guidelines. Please allow a 48-72 hour notice for coping. Payment is required for copies of records unless given to another physician's office.

My signature below verifies that I have read and understand the policies out lined above.

Parent's Signature

Date