BRIGHT FUTURE PEDIATRICS, P.S.C.
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Office Financial Policy

Bright Future Pediatrics, P.S.C. is committed to providing excellent medical care for your child/children. Due to costs associated with quality medical care along with the complexity of insurance policies, billing and collection practices, we have adopted the following financial policies.

1. Registrations are updated annually **and** when personal information changes to ensure that our files are current. A copy of your insurance card must be scanned once per calendar year, even if the information has not changed. If your insurance has changed, your new insurance information must be presented before your visit. If you are unable to produce your insurance card/information, you will be treated as a Self-Pay account until the correct insurance card/information is provided.

2. Payment/deductibles and /or co-payments are due at the time of service. A current insurance card must be presented at the time service is provided. If charges are filed incorrectly due to outdated information, the complete balance then becomes your responsibility. Many of our families have Health Savings Accounts (HSA), or Health Reimbursement Accounts (HRA). If you do not have your HSA card or HRA information at time of service, an alternative method of payment will be requested. You will be expected to pay at the time of service until your deductible has been met. We accept cash, check, Visa, MasterCard, American Express, Discover and Apple Pay.

3. Periodically, your insurance company updates coordination of benefits (COB). The insurance companies must determine whether you have other insurance coverage. If you do not provide your insurance company with this information they may deny claims until proper information is received. You will be responsible for payment to this office for any balances incurred as a result of not providing updated COB information to your insurance company.

4. Our office will make every effort to collect payment from your insurance company, but if all attempts fail, we will rely on you to contact your insurance company to facilitate the payment of claims in a timely manner. If your claims are past 90 days aged, you will be expected to pay your claims in full. If your insurance company processes the claims after you have paid, a refund will be sent to you.

5. Newborns need to be added to your insurance plan within 30 days of birth to ensure coverage. Please be sure to complete the required paperwork and submit it to your insurance company as soon as possible. You will be responsible for any charges incurred that are not paid by your insurance company if you fail to add your newborn child to your policy in a timely manner. Our office understands that it takes time to have your newborn added to your plan and receive an insurance card. We will collect copayments, co-insurance or deductibles for up to eight weeks after your baby is born. If you do not have your child's insurance information prior to your baby's two month preventative checkup, your account will be treated as a Self-Pay account. Self-Pay accounts are required to pay in full at the time of service. If immunizations are to be given, payment will be required prior to the administration of same.

6. Healthshare plans are not insurance policies. Healthshare plans are treated as Self-Pay and require payment from you at the time of service. If the healthshare plan processes and makes payments toward your claims, a refund will be sent to you.

7. It is your responsibility to know the details of your insurance plan as well as the benefit levels and amount of office co-pays, co-insurance, deductibles and referral restrictions. Please contact your health insurance carrier if you have questions about your coverage. For billing questions, you may contact our Billing Office at 859-282-4123, Monday through Friday, between the hours of 8:00 am and 4:00 pm.

8. **If your insurance is a high deductible or indemnity type plan, the office will file your claim directly with the insurance company. However, a payment in the amount of $65.00 is required at the time of service until your deductible has been met.**

9. **Additional Fees Incurred:**
    - **A fee of $25.00 will be added to your account for returned checks by the bank, in addition to all bank charges incurred.**
    - **Prepaid clerical fees of $25.00 will be charged for the completion of forms such as Family Medical Leave, etc.**
    - **A fee of $5.00 will be charged for the replacement of a form already provided such as immunization history, school physical forms, etc.**
    - **A fee of $10.00 will be charged for additional copies of KHSAA and/or other state-specific athletic forms.**
    - **Walk-in appointments and appointments scheduled after hours may incur an additional fee.**
    - **There is a fee for missed checkup appointments and/or consultations without 24 hours notice of cancellation. The fee for missed checkups and consultations is $75.00. Multiple missed appointments may result in dismissal from the practice.**

10. This office retains a collection service when accounts become delinquent. All future "well child" care or checkup appointments will not be scheduled until all outstanding balances are paid in full. The practice may issue a termination of medical care when accounts continue to be delinquent.

11. If and when my child (children) and/or dependents are over the age of 18 years, I understand my financial responsibility for him/her/them will remain unless I have provided written notification to Bright Future Pediatrics, P.S.C. that I will no longer be responsible prior to the rendering of services for said child (children) and/or dependent.

The above financial policy will remain in effect until revoked in writing.

Revised: 3/17/2025