



**Indianapolis Independent Pediatricians, P.C. ("IIP")
FINANCIAL POLICIES, Effective 4/15/10**

PAYMENTS:

Co-pay is an agreement between you and your insurance provider. Co-pay is due at check-in, at each and every time of service. VISA, MASTERCARD, and DISCOVER credit card payments are accepted in the office, as is your personal check, money order, and cash. Please note: A \$25 charge will be assessed for any payment returned due to "insufficient funds."

ACCOUNTS PAST DUE:

Patient/parent authorizes payment for any medical services to be paid directly to IIP. Pt/parent also authorizes the physician to release any information acquired in the course of my treatment necessary to process insurance claims. Patient/parent acknowledges: fully aware that Patient/parent will be responsible for any non-covered services.

Payment is due immediately upon receipt of your statement, and can be made by VISA, MASTERCARD, and DISCOVER. Credit card payments will also be accepted via secure website, <http://www.iippayments.com/>. Balances not paid in full, or with a documented and agreed upon payment plan, will be assessed a late payment fee of \$10 the first month and \$20 per month thereafter if it remains unpaid (and/or if payments are not received as agreed upon). Only three reminders will be sent to you regarding any past due balances before sending your account to our Collection Agency. Non-compliance may result in account being sent to small claims court, collections agency, credit bureau reporting, and discharge from our practice. In the event an account is turned over for collections, the person(s) responsible for the account will be responsible for all collections costs including reasonable attorney fees and court costs.

MISSED APPOINTMENTS:

Indianapolis Independent Pediatricians requires a 24-hour notice of appointment cancellations. For Established Patients that miss two (2) or more appointments without such proper notice, a "last chance letter" will be mailed to Parent; one more missed appointment will cause us to request you transfer to a new physician's office. For New Patients, one missed appointment without proper notice will cause us to mail you a "last chance letter." When you call to cancel your appointment, we will document your child's appointment history with date/time of your call. *Appointments missed and not cancelled in advance are subject to a "no show" fee of: \$35 for established-patient appointments; \$50 for new-patient appointments.*

As a courtesy, IIP will make text reminder calls for appointments. If you do not receive a reminder call or message, the above policy will remain in effect.

ACCOUNT CONSULTATIONS:

Patients should be aware that more than one visit can be charged on the same date of service with the physician. For example, if you are in for your annual physical examination and other problems are addressed or treated, an additional office visit fee may be charged.

The physicians are here for your health needs, so your financial issues or billing concerns should be discussed with our Billing Office Staff. They are properly trained to discuss your account and make payment arrangements. If you need further assistance with your account, our Office Manager may be consulted as well.

MEDICAL RECORDS:

If you need our office to transfer your records to another physician, we are required to receive an authorized signature prior to releasing the records. We will provide your child's immunizations records at no charge. If you require a copy for your own personal needs, for a new primary care physician, or for any other company or purpose, there will be a charge for the records, as well as for postage if you do not pick up the copied records.