

PARTNERS 4KIDS FINANCIAL POLICY

All of us at Partners 4Kids believe it is essential to our patients and their parents that we outline our expectations regarding the financial aspects of your visits with us. We have developed these policies based on industry standards and past experiences. These policies are presented for you to understand how we interact with you, your insurance company, and some of the constraints we must follow due to contractual and/or legal requirements. We encourage you to contact our Practice Manager at **340-774-KIDS (5437)** or send an email to info@partners4kids.com, if you have any questions.

Required at Check-In

1. Verify Personal Contact Information
2. Present Current Copy of Insurance Card
3. Present Current Picture ID
4. Payment of any Outstanding Balance
5. Payment of Today's Visit, Co-pays, Co-Insurance & Deductibles (Before going to the room)

Copays: Per our contract with your insurance company, copays are due and must be collected at the time of service, including most “nurse” visits. Copays cannot be “comp’d” or credited to an account as this would constitute a breach of our contract with your insurance company. We may choose to reschedule an appointment in the event a co-payment cannot be made at the time of the visit.

Coinsurance and Deductibles: We will collect any coinsurance or deductible amounts due as identified by your insurance company at the time of service.

Insurance Billing: Partners 4Kids will bill your insurance company for services provided. Ultimately, you are responsible for any charges not paid by your insurance carrier. By having us bill your insurance company, you are assigning your benefits to Partners 4Kids. In order for us to accurately and correctly bill your insurance company, we require for you to provide us with current information at every visit. This includes an up-to-date copy of your insurance card and a completed patient information sheet. These documents must be updated on an annual basis and/or whenever there is a change. Failure to provide accurate insurance and demographic information may result in you being liable for services rendered that day. If we cannot validate active coverage with your insurance carrier, your account will be considered self-pay. In such cases, we will collect payment at time of service and refund any amounts subsequently collected from your insurance carrier.

PARTNERS 4KIDS FINANCIAL POLICY

If you are insured by a non-participating insurance carrier, we will expect payment from you at time of service, and it will be your responsibility to submit any claims to your insurance company for direct reimbursement to you. We will provide you with the appropriate information to assist you in this process. You can have access to “My Kid’s Chart” <https://p4k.pcc.com/portal/session/new> and see any pending balance. Ask the front desk Patient Service Representative or Office manager how to get that link with a temporary password. The instructions on how to navigate thru the portal is on our website <https://partners4kids.com/>

Uninsured (Self-Pay) Patients: Payment is expected at the time of service unless other financial agreements have been made prior to your visit. Please know that we do offer discounted fees for patients without health insurance. Call our office if you would like specific information.

Retroactive Denials: A retroactive denial is a reversal of a previously paid claim. That is, your insurance company denies a claim after paying for it and takes the money back from our office & the provider. If a claim is retroactively denied, the enrollee then becomes responsible for the payment. If you have a policy that was in effect for that date of service, your active policy may/may not pay for the charges and we will gladly supply you with a claim form for your reimbursement directly from your active insurance policy. Please note some insurance have a filing period and these charges may not be reimbursed to you, please check with your insurance company for their guidelines.

Examples that can result in retroactive denials, this list is not all inclusive:

- When a third party* is legally responsible for payment
- Another health insurance company made a payment, and we did not receive notice
- You didn’t pay your premiums on time and your coverage was terminated
- Your insurance paid for a service that you did not receive, was not medically necessary or was not covered by your benefits
- There was an error on the claim
- Your Policy was not active at the time of services.
- Change in insurance and you did not provide us with the correct insurance at check-in for the visit.

PARTNERS 4KIDS FINANCIAL POLICY

Newborns: If you have a newborn or newly adopted child, congratulations! Your child is covered for the first 28 days by the mother's policy, regardless of which parent will provide ongoing insurance coverage. You should contact your insurance as soon or before 28th days from birth to add the new child to your policy.

Permanent coverage must be in place before the automatic newborn coverage expires. You must have your child added to your policy by the 28th day of birth for the one-month well-visit to be covered by the insurance and should have an insurance card or copy of coverage to present at that visit. If you have not received an insurance card, contact your insurance company prior to the visit to verify coverage and get an temporary active insurance ID number. If you do not have active coverage your visit we may rescheduled/delayed your appointment, or you may be personally responsible for the bill.

Birth certificate: Once you receive the child's birth certificate, please send it to our email or bring it to our office so we can prepare a Clinical Medical Letter. This is a requirement to apply for your child's social security card. This document cannot be returned by email as the social security administration requires original documents.

Vaccines: Most commercial/employer health insurance plans cover the cost of vaccinations. However, you should check with your insurance provider before scheduling your child's appointment for information on your plan coverage for wellness vaccines. Some plans such as indemnity, private health plans and small company health plans may not cover vaccines in full or partial. Again please check with your insurance to find out your plan benefits. If you don't have health insurance, or if you're insurance doesn't cover vaccinations, your child is eligible for vaccines through the Vaccines for Children (VFC) program. The VFC Program helps families of eligible children who might not otherwise have access to recommended childhood vaccines.

Children through 18 years of age who meet at least one of the following criteria are eligible to receive VFC vaccine:

- **Uninsured:** A child who has no health insurance coverage at time of visit.
- **American Indian or Alaska Native:** As defined by the Indian Health Care Improvement Act (25 U.S.C. 1603)
- **Underinsured:** A child who has health insurance, but the coverage does not include vaccines; a child whose insurance covers only selected vaccines (VFC-eligible for non-covered vaccines only). Underinsured children are eligible to receive VFC vaccine only through a Federally Qualified Health Center (FQHC) such as St. Thomas East End Medical Center

Please bring the immunization card (Yellow card) with you to all types of visits.

No Vaccine Card, No Vaccine

PARTNERS 4KIDS FINANCIAL POLICY

Medical Records: Partners 4Kids charge a per page fee and any postage, payable in advance, if you would like a copy of your records printed/mailed to you or another physician. This per page fee policy is available upon request. As always, if a collaborating physician (primary care or specialist) requests portions of your record to assist in your care, there is no charge. It will take 5 to 7 business days. Parents must fill out a medical release form. This form can be found in our website <https://partners4kids.com/> under the "Forms". After completing the form, it can be sent to info@partners4kids.com.

Forms: A fee is charged for each form (school, camp, FMLA, driver's license, etc.).

See the chart in the last page of this document.

Lab Charges: Depending on your insurance, you may get a separate bill from the lab facility that performs your lab work these charges should be discussed directly with the lab facility. You may receive a bill from our office for any in-house labs, once we have received the explanation of benefits from your insurance advising us the fee you are responsible for we will bill you directly for that fee.

Billing/Payment: Partners 4Kids will bill you on a monthly cycle, for charges that have been identified as your responsibility. We will not bill you for charges that are currently submitted to your insurance company or for any contractually agreed upon adjustments. Payment is required within 30 days of the billing date. All statements are due upon receipt. If charges remain unpaid after 30 days, a second statement will be rendered with a notice requesting immediate payment. If charges still remain unpaid after 60 days, a final statement will be rendered with a letter informing you that our relationship is subject to cancellation after 30 days of urgent and emergent care. All further services will be provided on a cash-only basis.

Divorced/Separated Parents of Minor Patients/Court Orders: The parent who consents to the treatment/ the accompanying adult of a minor child is responsible for payment of services rendered at the time of service. Partners 4Kids will not be involved with separation or divorce disputes. If there is a restraining order from the court, the parent that brings the child to our office must bring evidence.

Missed Appointments: We respectfully request that you notify us 2 hours ahead of time in the event you cannot make your scheduled appointment so that we have a sufficient amount of time to accommodate other patients. You can call 340-774-5437 or leave a voice message, you can also send a email to info@partners4kids.com. Failure to provide a 2 hour notice and/or failing to show up for appointments will result in the imposition of a missed appointment fee. See the chart in the last page of this document.

PARTNERS 4KIDS FINANCIAL POLICY

There is a 10-minute grace after the scheduled appointment time. After the grace period, your appointment will be rescheduled.

As a courtesy, Partners 4Kids will send a friendly reminder for all scheduled appointments, however, every parent guardian is responsible for any scheduled appointment.

Returned Funds: Any funds returned (i.e., checks) will be charged a service fee.

Non-Covered Services: As the subscriber, you are responsible for knowing the terms and limitations of your specific plan. Partners 4Kids is not responsible for charges incurred as a result of any particular service not being covered and/or paid for by your plan, the staff of Partners 4Kids cannot be responsible for knowing the terms of your plan policy. You are responsible for any visit, treatment, and/or equipment charged and not covered under your plan. See “Fees for Non-Covered Services” following Financial Policy.

Collections: We understand that at times there are extenuating circumstances that may limit your ability to pay off any outstanding balance. In these types of situations, we may be able to arrange a payment plan. Failure to meet payment obligations outlined in said payment plan will make the agreement null and void and the practice will then reserve the right to make a “Demand For Payment” on the remaining balance. Balances greater than 90 days old and where a payment plan has not been established may be turned over to an outside collection agency. In the event this occurs, you may end up being discharged from the practice and responsible for any collection fees incurred by Partners 4Kids.

Eligibility: You are responsible to ensure that one of the Partners 4Kids physicians are eligible to be your primary care physician and the authorized provider is within your insurance plan coverage. Your insurance is a contract between you, your employer and the insurance company. We are not a party to your plan contract. Not all services are a covered benefit in all contracts. Some insurance companies arbitrarily select certain services they will not cover. While we make the best effort to understand the benefits of your insurance plan, it is your responsibility to distinguish services that are covered from those that are not covered. For example, is your child’s physician a participating provider with your insurance company? If blood work is needed following an office visit, can it be performed at the doctor’s office, or should you go to a laboratory approved by your insurance company? If your child needs to see a specialist, do you need to obtain a referral from your primary care provider? Are you required to make a co-payment for a well examination? Please take the time to become familiar with your insurance coverage. You will be responsible for any charges denied by your insurance company in the

PARTNERS 4KIDS FINANCIAL POLICY

event that one of our physicians is not selected as your primary care physician or is not an authorized physician within your specific plan.

Reasonable and Customary Charges: Partners 4Kids, not your insurance company, establishes our fee schedule, which is based on published values. We reserve the right to accept or decline recommendations from your insurance company on what is defined as a reasonable and customary charge.

Online Payments: Your payment and personal information submitted through our online payment portal is safe. Our Secure Sockets Layer (SSL) software is the industry standard and among the best software available today for secure commerce transactions. It encrypts all of your personal information, including credit card number, name, and address so that it cannot be read over the internet.

Refunds: If Partners 4Kids owes you a refund due to an overpayment or credit balance, we will issue a refund within the 30 days of the request, after our billing company, Key Solutions Medical Billing LLC (772-871-0055) has verified it. Any account that may have outstanding claims will not be eligible for a refund until all claims have been paid by the insurance company. Provided there are no other balances owed to Partners 4Kids, we will credit your credit card or send you a check, depending on how you made your initial payment. For any questions concerning a refund due, please call our Billing Department at 772- 871-0055 or 340-774-5437 or send an email to billing@partners4kids.com.

Waiver of Patient Responsibility: It is the policy of the practice to treat all patients in an equitable way regarding account balances. The practice will not waive, fail to collect, or discount co-payments, co-insurance, deductibles, or other patient financial responsibility in accordance with state and federal law, as well as our agreements with payers.

After Hours and Weekend Charges: In accordance with national billing guidelines, if any service is performed on a Holiday, Saturdays, Sundays, or after normal scheduled office hours or for unscheduled walk-in appointments there is an additional fee that may or not be paid by your insurance company, you will be responsible for any unpaid balance, co-insurance or deductible, as per your insurance explanation of benefits.

PARTNERS 4KIDS FINANCIAL POLICY

Insurance Information

Below is a list of the insurances that we accept. Please have your card with you at the time of your visit. If we are a participating provider and we will file your claim, you are responsible for only the deductible or co-pay, and/or co-insurance at the time of visit. If we are not a participating provider for your insurance, we will gladly supply you with a claim form for reimbursement. If you do not have insurance you are responsible for the entire charge at the time of service.

- **Aetna**
- **APWU**
- **Blue Cross Blue Shield (BCBS) (PPO)(Federal)**
- **Cigna**
- **Cigna Intl.**
- **Colonial**
- **ELAN Health Smart**
- **GEHA**
- **National Health Insurance (NHI)**
- **Tricare Prime (with authorization letter)**
- **Triple S (must have authorization letter)**
- **United Healthcare and Affiliates: All Savers PPO; UMR PPO; Golden rule PPO; UHC Choice- Choice Plus Network**
- **Wells Fargo**

Covid -19 Testing

Currently insurance policies within the Virgin Island are not covering the cost of the covid -19 test for the following reasons:

- Travel
- Return – to -work
- Return to school
- Pre-employment
- Recruitment to armed forces
- Sports
- Routine and/or executive physicals

PARTNERS 4KIDS FINANCIAL POLICY

- These policies are subject to change. A current copy of this policy will always be available to you either in our website <https://partners4kids.com/>, at the office, via email or by sending in a stamped self-addressed envelope.

Methods of Payment: We accept cash, checks (by mail), Visa and Mastercard. We realize that temporary financial problems may affect payment to your account. If problems do arise, please contact our Billing Department at 772-871-0055 or 340-774-5437 for assistance.



PARTNERS 4KIDS FINANCIAL POLICY

NON-COVERED SERVICES:	FEES:
Any missed scheduled appointment (If not canceled 2-hour prior) a No Show FEE will be applied (STT)	\$35
Any missed appointment, scheduled on the same day (if not canceled 2-hour prior) a No Show FEE will be applied (STT)	\$35
Any missed scheduled appointment (If not canceled 2-hour prior) a No Show FEE will be applied (BVI)	\$50
Any missed appointment, scheduled on the same day (if not canceled 2-hour prior) a No Show FEE will be applied (BVI)	\$50
To make any changes, on any appointment, please call 340-774-5437 or send an email to info@partners4kids.com	
Returned Check:	\$25
Universal Child Health Record/Sports/Camp/	\$0.00 if completed during the physical appointment \$5 (if updated with the physical)
Antilles Forms <u>Please verify the Antilles School Form mandatory dates for the current year</u>	\$0.00 if completed during the physical appointment \$10 if completed within the last physical before or after the Antilles School Form mandatory dates for the current year
Antilles Forms (update for Height, weight) <u>Please verify the Antilles School Form mandatory dates for the current year</u>	\$20.00 if a physical appointment was done in the current year and the school form needs to be completed during the mandatory dates for the same year, this charge will apply. With or without insurance.
Head Start forms	\$20
Driver's License Form:	\$0.00 during the annual physical visit \$20 within the year of the last physical
FMLA Form:	\$20

PARTNERS 4KIDS FINANCIAL POLICY

Rush (Same-Day) Forms:	\$30
NON-COVERED SERVICES:	FEES:
Transfer Medical Records Out:	\$1 (per page, not to exceed \$15, per child)
Ear Piercing: (Sterile Surgical Steel Earrings included)	\$90 (two ears) \$65 (one ear)
Masks	\$3.00