

Southeast Denver Pediatrics, P.C.

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Office Policies

In order to continue providing high quality medical care to your children, it has become necessary that we, the doctors at Southeast Denver Pediatrics, formalize our practice policies. Please review and sign this form prior to leaving the office today so that it may be included in your family's medical chart. We are happy to provide an additional copy for your records.

Well Child Exams:

Regularly scheduled "check-ups" are important in the medical care of your children. In addition to monitoring growth and development and providing vaccinations, these visits are intended to address your concerns. They are typically scheduled for 30 minutes and scheduled 6 to 8 weeks in advance.

1. **Rescheduling and Missed Appointments:** If it is necessary to cancel or reschedule an appointment, please do so as soon as possible. A \$100.00 fee will be charged to those who do not provide 24 hours notice for the cancellation of a Well Child Exam (this includes Med Checks, ADHD Evaluations, and other regularly scheduled 30 minute appointments). A \$100.00 fee will be charged to those who do not provide 24 hours notice for the cancellation of any other regularly scheduled appointments (this does not include same-day or next-day appointments). A \$100.00 fee will be charged to those who do not provide 48 hour notice for the cancellation of a Therapy appointment. Also, because "No Show" appointments make it difficult for others to schedule Well Child Exams, three "No Shows" per family may result in dismissal from our practice.
2. **Late Arrivals:** Families and patients arriving more than 10 minutes late for their scheduled Well Child Exam may be asked to reschedule for a future date. Late arrivals for the check ups decrease the amount of time that we can spend addressing your concerns and create unplanned delays for patients scheduled later in the day.

Acute/Urgent Visits:

We try to provide accessible and timely medical care for patients who are ill. Visits are usually scheduled for 10 to 20 minutes depending on the anticipated complexity of the illness. Generally, these appointments can be made on a "same-day" or "next-day" basis.

1. **Emergency/Urgent Visits:** If your child is ill or injured, please call before coming in to the office. Patients who arrive without a scheduled appointment may be asked to wait or return for the next available appointment at the discretion of our medical staff. We do not set aside time for "walk-in" visits. Therefore, in order to ensure adequate time and attention for your child, it is best to have a scheduled appointment.
2. **Saturday/Holiday Visits:** Saturday appointments are *not* regularly scheduled office hours. We reserve Saturday visits for emergent patients only. There will be an additional charge if your child is seen in our clinic on a Saturday. There may also be an additional charge (per national coding guidelines) for appointments that occur on holidays (including but not limited to the day after Thanksgiving, Christmas Eve, New Year's Eve, etc.).

All Office Visits:

1. **Multiple Children and Siblings:** If you will have more than one child who needs medical attention at a visit, please tell the person scheduling your appointment. Even seemingly minor problems deserve the full attention of a scheduled appointment. "Add on" visits may be asked to wait or return for the next available appointment.
2. **Co Pays and Payments:** As a condition of many insurance plans, Co Pays for each child must be paid for each office visit at the time of service. It is your responsibility to know whether or not you owe a Co Pay. If it is not paid at the time of service, a \$25.00 fee will be billed to you in addition to your Co Pay to cover the cost of additional processing. If you have questions regarding a bill, or feel that you may special payment arrangements, please contact our billing department as soon as possible.
3. **Delinquent Accounts:** Past due accounts will be assessed an annual fee of 18%. Failure to provide prompt payment on a past due account may result in that account being turned over to a collection agency. Any family referred to a collection agency will be dismissed from our practice. Following notification of dismissal from the practice, we will be available to provide emergency care for 15 days while a new primary care relationship is established.
4. **The parent or guardian who brings the child in for their appointment is responsible for payment independent of what a divorce decree may state. Both parents are responsible for payment at Southeast Denver Pediatrics. We will not intervene between parties; Reimbursement must be made between the two parents.**
5. **Children under the age of 18 must be accompanied by a parent or legal guardian at EVERY VISIT.**

By signing below I hereby give my consent for the use of telemedicine in my child's care.

If you have any questions or comments regarding these policies, please feel free to address them with our Practice Manager or Doctors.

I have read and understand the above:

Parent/Guardian Signature

Date

Patient Name