



Limestone Pediatrics, PLC
FINANCIAL POLICY
EFFECTIVE January 1, 2026

Thank you for choosing and entrusting Limestone Pediatrics for your child(ren)'s care. Drs. Poole, Thomas, Crowley and Goodsell are dedicated to providing excellent care to your children at a fair and reasonable rate. In order to provide this care, we have adopted the following financial policy. We recognize that the cost of health insurance has increased; unfortunately, our costs to provide care have risen significantly as well.

It is our goal to eliminate future misunderstandings regarding our billing and payment policies. Our staff will be happy to discuss any fees or financial issues in advance or at the time of your visit. We participate with most major insurance plans. While we will work with you to submit your claims to your insurance company, please note that ultimately your insurance is a contract between you and your insurance carrier. Each insurance policy is individual, and it is your responsibility to understand your benefits, eligibility dates, along with what is and is not covered by your plan. If claims are not paid insurance within 90 days, the unpaid balance becomes the responsibility of the parent/guardian. We will make every effort to work with you to file insurance claims and resolve any outstanding balances in a timely manner.

Please ensure that your address, phone numbers, and insurance information are always up to date for both parents/guardians. Our office must have a current copy of your insurance card and photo ID on file.
If your insurance changes, you must notify us immediately with the effective date of your new policy. Failure to provide accurate or updated information may cause claim denials, which will become your financial responsibility.
If incorrect insurance information is submitted and we do not receive updated information or communication after outreach attempts, a \$50 reprocessing fee will be applied to your account.

Co-pays, Co-insurance and Deductibles will be expected to be paid at the time of service. Private Pay Patients are expected to pay in full at the time of service. If there is an outstanding balance on your account and you are seen in the office, the balance will be required to be paid in FULL at the time of service. NO EXCEPTIONS.

Limestone Pediatrics does not get involved in disputes between divorced, separated or custodial parenting arrangements regarding financial responsibility for their child's medical expenses. By signing below, you agree the parent bringing the child for an appointment is responsible for the co-pay or balance, due at check-in, regardless of whether a divorce decree, custodial or other arrangement places that obligation on someone other than yourself. We are happy to provide receipts for paid medical bills for you as requested. Parental decision-making for divorced parents regarding medical care should be agreed prior to any visits. As a practice, we will not interfere in these decisions, but additional visits may be required if timely agreements cannot be met at the time of service.

Important Terms

- ❖ **Deductible:** This is the amount you are required to pay before the plan will pay any benefits for certain types of services
- ❖ **Copay:** Fixed amount that the participant pays for an office visit. Copays do not apply to the deductible in the PPO Plan
- ❖ **Coinsurance:** After the deductible is met the participant shares in the cost of medical care until the plan's maximum is met
- ❖ **Out-of-pocket Maximum:** The maximum amount the participant would be responsible for paying in the calendar year for covered expenses (includes medical copays, coinsurance and deductible.)

Preventive Visits and Problem Focused Visits:

Limestone Pediatrics requires a yearly physical at our office. At preventive visits, we cover several very specific components, including screenings, immunizations, and counseling. Occasionally, your child may also have a significant health issue raised during a well visit. We will need to bill for the work incurred for both accordingly (as problem-focused visits typically require a copay and/or a deductible may apply). Your insurance will process the visit codes according to your plan guidelines, applying copay, coinsurance, and/or deductibles as applicable. Health insurance contracts dictate your financial responsibilities, and you will receive a bill for these additional services.

Most insurance companies only cover 1 physical/well examination a year. If you are seen at an outside facility for a physical/sports physical, your insurance may not cover your yearly physical at our office. It is your responsibility to know your insurance benefits. If the benefit has been used for the year, you will be responsible for any balance that the insurance deems to be your responsibility.

No show or late cancellation fee: A fee of \$35 will be charged to patients who do not provide 24-hour notification to cancel an appointment or for patients who miss their scheduled same day appointment. After 3 no shows or late cancelled appointments, your family may be discharged from the practice. If a new patient misses their initial visit they may be dismissed from the practice.

Phone triage: After hours, we offer a telephone triage consultation service that puts you in touch with a pediatric trained triage nurse. Families will be charged for each triage call made \$20. There are exceptions for advice given for infants less than 90 days old or where recommendations are given to immediately be seen by a healthcare provider. Additionally, if a provider speaks with a parent directly after hours or on the weekend, the call will be billed to your health insurance.

Weekends, Federal Holidays, After-Hours and Visit Complexity codes: When you are seen for a weekend visit or a visit that is also a Federal holiday per your insurance we must add the extended code. If your insurance company defers responsibility of payment to your or your family, this is the decision of your insurance provider, not our practice. If you have concerns with what your insurance company covers, we recommend you call them directly to discuss your benefits and any concerns regarding coverage.

Payment:

We accept cash, debit cards, Visa, MasterCard, Discover, Amex. Our billing team may contact you at any of the numbers provided by you to resolve any outstanding balances. If HSA is used as a form of payment and it is later determined it was an overpayment and you have received a refund, it is your responsibility to rectify this with the HSA company. If we receive a returned check there will be a fee of \$50 added to the account.

You can expect to receive billing statements from our billing department and payment is due within 30 days. If we do not hear from you at that time, your account will be turned over to a professional collection agency. This will result in the termination of the physician/patient relationship, and you will be responsible for all agency and legal fees incurred.

Credit card on file:

Limestone Pediatrics offers a credit card on file to help streamline the billing process. Card information is securely stored, and our employees are only able to see the last 4 numbers of the card and the expiration date. The card on file will be billed on the 15th of every month for any outstanding personal balance of \$150 or less. If the account has a balance over \$150 the billing department will contact you for prior approval to process the payment. Once the card has been processed, you will receive a receipt to the email on file. **If the card on file declines when the payment is processed, the billing department will reach out to notify the family that updated payment information is needed. Failure to respond to the billing department or the office within 10 days will necessitate a fee of \$25 be applied to the account for untimely payment.**

Keeping a credit card on file will in no way compromise your ability to dispute a charge or question the insurance company's determination of payment. You will be given time to contact our billing department and speak with one of our billing representatives to discuss your charges.

Refunds: Payments that exceed your balance and result in an overpayment are reviewed monthly. We will attempt to contact you if this should occur. Accounts with personal credit balances will not be refunded unless all other charges have been processed by insurance.

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Portal: We require that every family maintain a portal account. You will be able to see account balances, pre-check in for upcoming visits, request medication refills, scheduled well child visits, and acute illness visits and request forms (school physicals, Immunization records). To request a portal account please visit our website www.Limestonepeds.com to fill out our secure request form. We will be utilizing some triage through the portal in the near future. We will send out updates and instructions once this is available.

Vaccines: Once verbal consent by the parent for vaccination is received, any charges for those vaccines if refused once drawn up and prepared for administration, will be the patient responsibility and are not billable to insurance.

Assignment of Benefits/Authorization: As the parent or legal guardian, I authorize payment of medical benefits directly to Limestone Pediatrics, PLC for services rendered. I further agree to be fully responsible for all lawful debts incurred for these services.

AVOIDING SURPRISE BILLING: Patients without or not using insurance will be provided a Good Faith Estimate (GFE). The GFE is only an estimate of items or services reasonably expected to be furnished at the time it was issued. Actual items, services, or charges may differ from the GFE once the provider completes the billing for the visit.

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Signature	Printed Name	Relationship	Date