



RTC Pediatrics

We care for kids

FINANCIAL POLICY

We are pleased you have chosen Reston Town Center Pediatrics (RTCP) for your child's medical care! We appreciate your cooperation in following our office and financial policies so that we may continue to provide the absolute best care to our patients. Our staff is always ready to assist you with any additional questions you may have.

NEWBORNS

Please make sure that you add your newborn to your insurance policy within 30 days of birth to ensure coverage and select one of our physicians as your baby's primary care provider if a PCP is required. Be sure to bring any hospital records regarding your baby's health (including Hepatitis B vaccination, hearing test and newborn screen) to your first office visit.

BILLING AND INSURANCE

We are committed to providing you with the best possible care at a fair price and helping you receive maximum insurance benefits. RTCP participates in many insurance plans, **it is your responsibility to fully understand your plan and any health savings accounts you may have.**

Your health insurance policy is a contract between you and your insurance company. It is particularly important that you understand its provisions. Please review your policy and become familiar with the benefits it provides. If you have any questions about the coverage, you should contact your company's member services department. Some insurance plans do not pay for preventive health care, including physical exams. If you discover that your insurance company has rejected a claim based on your coverage, we cannot change the coding of the service performed in order to get the claim paid, as this is considered fraud. At times, during a preventive health exam, we may discover another issue requiring additional work. If this occurs, we are required to charge for the additional work. Therefore, you may be responsible for a co-pay, deductible or co-insurance for the Well Child Check

Questions regarding the filing of claims or the responsibility of payment may also be discussed with our billing office staff (703-435-0726). The parent or guardian is always responsible for payment, not the insurance company.

We are glad to work with you and your insurance company. To help make this process easier and create less stress for you, we would like to suggest the following guidelines:

- Provide a current insurance card at each visit. Some insurance plans have a card for each member. If that is the case, be prepared to provide each child's card.

- If you have a co-pay, coinsurance, or deductibles, please be prepared to pay this at the time of your office visit.
- If you have a secondary insurance, please let us know.
- If the need arises for your child to see a specialist, please contact us at least 5 business days prior to appointments with specialists if your insurance plan requires a referral or authorization number

Patient balances are due within 30 days after insurance pays. For your convenience, we have a Credit Card on File program. We do not store your sensitive credit card information in our office. We store it on a secure website called a vault. The vault we use is called Retriever Medical/Dental Payments, Inc. Retriever is PCI-DSS compliant and is certified by VISA® and Mastercard®. This vault is only used to process your payment and email you a receipt once payment is processed. We may bill up to a maximum of \$150 without notifying you. If the total is over that amount, our billing office will contact you to discuss the amount. Please refer to the Credit Card on File Frequently asked questions document for more information.

We require payment in full at the time of visit if:

- Current insurance information and a current insurance card are not presented at the visit.
- The patient has no insurance coverage.
- We do not participate with your insurance plan.

If the need arises for special arrangements to pay your account, please contact the billing office at 703-435- 0726.

A \$50 missed appointment fee will be added to your account for all well child exams that are missed or not canceled within 24 hours of the scheduled appointment. If you no show for a same day sick appointment, your account will be charged a \$25 missed appointment fee.

Additional fees:

School Form	\$20/Form (No charge if requested at the time of visit)
School Form Rush Fee	\$45
After-Hours Phone Call	\$25
Writing a Letter	\$20
Returned Check Fee	\$20
Copy of Medical Records	\$50

If you receive a statement that shows an amount due as patient responsibility and feel it is incorrect, please contact your insurance carrier or our office immediately. There are some instances in which your insurance will deny claims incorrectly. They can deny due to Coordination of Benefits, meaning your medical claims will not be paid until your insurance receives word from the policy holder informing them of any other insurance. At times the patient’s date of birth or Primary Care Physician (PCP) is incorrect with the insurance, these are corrections that need to be made to the policy in order to facilitate claim payment.