



Office Procedures and Policies

I give any doctor at Valencia Pediatric Associates permission to obtain lab, x-ray, or immunization information from any source for my child.

Financial Policy

Our relationship is with YOU, not your insurance company. Know your benefits. Inform us of changes and bring your new card in. We cannot bill without a valid card. If you have no card you will be asked to pay at the time of service. If your insurance has lapsed and you do not give us your new information, you will be responsible for the bill. We encourage you to contact your insurance company to inquire about your benefits. Know, for example, if your insurance does not pay for check-ups which are less than 12 months apart. Know which labs, immunizations, and which hospitals are covered.

- Valencia Pediatric Associates requires a credit or debit card be kept on file for all its patients.
- Insurance companies require copays, coinsurance and deductibles to be collected at the time of service. We are not allowed to waive them or bill for them.
- If a claim is denied, it is your responsibility to contact the insurance company and, if not paid, it is also your responsibility to pay it.
- Additional issues addressed at well check appointments may be billed separately. Some insurance companies will not cover two office services on the same date so payment for one of them may be denied by the insurance company or an additional co-payment may be required.
- If after drawing up a vaccine a parent/patient declines to have it administered, the cost for that vaccine will be patient responsibility.
- If parents are divorced, whoever brings the child into the office is responsible for co-pays and for having a current insurance card.
- School forms, letters, and copies of records are charged depending on the extent of work they entail.
- I authorized and voluntarily consent to the participation and treatment of my child in a Telemedicine Consultation and or/ treatment with Valencia Pediatric Associates.
- Well Check appointments must be canceled within 24 hours or you will be charged \$75,
- \$40 for other missed appointment services, such as acute appointments, sick appointments, and med check appointments. You will be charged a \$40 fee if the appointment is not canceled at least 30 minutes prior to the appointment start time.
- New patient well check appointments must be canceled within 24 hours or you will be charged \$100.
- Returned checks incur a fee of \$35.

Acknowledgement of "Abuse Free Zone"

At Valencia Pediatric Associates we appreciate and respect our staff. It is our belief that our staff should have a work environment free from verbal and physical abuse. We expect each one of you to treat each one of our staff members as you would like to be treated. Outbursts against our staff will not be tolerated and may result in your discharge from the practice.

X _____

Date _____