

Premiere Pediatrics

Financial Policy

Premiere Pediatrics serves all patients regardless of ability to pay. Discounts for essential services may be offered depending on family size and income. Please speak to the front desk prior to your appointment date to apply.

All patients must complete our "Patient Information Form" before seeing the provider. We also require these forms to be updated annually.

Our office offers Immunizations through both state and private sources. It is your responsibility to contact your insurance company prior to your child's visit in order to verify if they cover private immunizations (those that our office has purchased). If your insurance does not cover them you will be responsible for payment in full prior to vaccines being administered, or you may be referred to the State Health Department for vaccines as we are not a deputized facility.

For a checkup with recommended immunizations, the charge can be anywhere from \$200- \$800 per visit. State provided immunizations are available to patients who qualify as per the VFC (vaccines for children) guidelines.

Your child is eligible to receive state vaccines at our office if:

1. Your child is Uninsured
2. Your child is on our current SoonerCare roster, or has fee-for-service DHS coverage, without a private insurance.
3. Your child is Indian or Alaskan Native.

AS OF MAY 1, 2019 we accept cash, checks, Visa, MasterCard, Discover, and American Express.

INSURANCE: We are contracted with most major insurance companies, including most HMO's and PPO's. It is your responsibility to know your benefits prior to appointment. Please understand that you are responsible for any charges your insurance does not cover.

In the event, your insurance is inactive at the time of your visit, your payment for visit will be required at time of service or you may reschedule your appointment until such time you can re-instate coverage. Please understand your policy and coverage is an agreement between you and your insurance company. Your Insurance card is expected at each visit. If we are not contracted with your insurance, or we are not your PCP listed as per your HMO plan, you must pay for visit at time of service. We do not file to third party insurance companies. This applies in such instances as motor vehicle accidents, or workman's comp scenarios.

BALANCES: Copayments are due at the time of service, by the person who is bringing the child in for treatment. Patients with outstanding balances will be required to set up a payment arrangements. In the event no arrangements are made, account will be sent to an agency for collection. Accounts processed for collections must have active payment arrangements with collection agency. Failure to honor payment arrangements and/or accounts sent to collections will be assessed for dismissal.

WE DO NOT BILL A THIRD PARTY FOR SERVICES. For instances where an auto insurance will need to be filed, payment is expected at time of visit, as most health insurance plans will deny payment for services involving an accident where another party is liable.

RETURNED CHECKS: There is a returned check fee of \$25 plus an additional \$5 for every time the bank reruns your returned check. Payment is due at the time the check is picked up. Checks are required to be picked up within seven days of bank notice, or they will be turned over to the district attorney for collection.

As of January 1, 2018 we reserve the right to assess a \$20 fee for missed appointments.