



Financial Policies

We are dedicated to providing you with the best possible care and service, and believe understanding our financial policy is an essential element of your care and treatment.

Private Insurance Patients

SCPA accepts most private insurance plans. Please contact your insurance company at the phone number listed on the back of your insurance card to find out if we are a Participating Provider. If SCPA is not in your network, you will be considered self-pay. *Self-pay policies will apply.*

We will attempt to verify patient eligibility on each date of service, but please be aware this does not guarantee payment by your insurance company. Our patients are responsible for updating their insurance information with us. Please ensure we have an updated copy of your insurance card. Insurance denials due to inaccurate information given to our staff will result in the guarantor being responsible for payment. If your insurance plan includes a copayment, we require you to pay this fee at the time of the appointment.

If you find yourself unable to pay your balance due to unexpected financial obstacles, please contact our billing department for assistance with the management of your account.

If you choose not to utilize your health insurance, kindly submit a written confirmation before receiving services. *Self-pay policies will apply.*

Third Party Billing

Please note that we are not responsible for 3rd party billing such as LabCorp, Diatherix, Neb Pros, Quest, Medical Select, Genesight or any non-SCPA entity. It is your responsibility to check with your insurance company to see if charges through these outside parties are covered and notify us if you do not wish to use any specific 3rd party company before services are rendered.

Non-Covered Services

Insurance plans vary considerably, and we cannot predict or guarantee what part of our services will or will not be covered. We encourage you to refer to information from your insurance company or call them if you have questions about your coverage. Ultimately, all charges are your responsibility.

Common non-covered services may include recommended standardized screens, vision and hearing screenings.



Medicaid Insurance Patients

SCPA accepts all SC HMO Medicaid policies. Please ensure that we have an updated copy of your South Carolina Medicaid card. It is your responsibility to contact your HMO in advance to have our practice listed as the primary care physician. We will attempt to verify eligibility on each date of service. If the patient is NOT eligible on the date of service, the self-pay policy will apply. If Medicaid becomes eligible on a prior date of service, you are responsible for notifying us and the bill will be refiled to Medicaid.

Patients ages 19 years and older are not eligible for Vaccines for Children. Private vaccines will be billed to Medicaid.

Patients Without Active Insurance Coverage

Patients without active insurance coverage are considered self-pay and will be required to pay in full at the time of service.

Standard Fees:

Office Visits*: Established patients **starting at** - \$150 | New patients **starting at** - \$175

Well child checks: Established patients - \$180 | New patients - \$200

Sports physical - \$60

Vaccination appointments - \$20.00 per injection

Ear piercing - \$75.00

Form Completion - \$20.00

Returned Check Fee -\$35.00

*Labs and Procedures will be an additional charge

No Surprises Act

You have the right to request a Good Faith Estimate of the expected costs for services provided. This estimate is intended to help you understand any anticipated financial responsibility for your care. If you are a self-pay patient and schedule an appointment, you can expect a Good Faith Estimate to be provided. If you receive a bill that is \$400 or more above your Good Faith Estimate, you have the right to dispute the bill.

Extended Care Services

Our practices provide scheduled evening and weekend hours. An additional charge of CPT 99051 or 99050 may apply for use of these services. Please contact your insurance company if you have questions regarding coverage.

Fees for Duplication of Medical Records

Pursuant to South Carolina Code, 44-115-120, a physician may charge a fee for the search and duplication of an electronic medical record.



Patient Refunds

Refunds will be reviewed on a family account basis. Any credits may be applied across outstanding family balances. Once a refund is confirmed and approved, it will be issued to the account holder via check or the credit card on file that originally paid the balance resulting in the credit.

Billing

We accept all major credit cards (American Express, Discover, Mastercard, Visa). We do not accept Care Credit. Outstanding balances are due within 30 days of your statement unless prior arrangements have been made with our billing department. Overdue balances past 120 days will result in the patient not being able to be seen at our office unless the balance is paid in full prior to their appointment.

The accompanying parent or adult is responsible for full payment at the time of service. In case of divorce, please do not place our office in the middle of marital disputes. It is your responsibility to work out the payment of your child’s medical care between the custodial and noncustodial parent. We realize that temporary financial problems may affect timely payment of your account.

We encourage you to contact our billing department at 803-788-6146 if you have a question about your bill or if you are having trouble paying your balance. Satisfactory payment plan arrangements can almost always be made. Financial considerations should never prevent children from receiving the care they need at the time they need it.

All policies are subject to be changed without advance notice. I have read and understand the South Carolina Pediatric Alliance financial policies:

Patient Name

Patient Date of Birth

Signature of Responsible Party

Date