

We would like to thank you for choosing Centre Pediatrics. We are committed to providing your child with the best possible medical care. Below please find and review our billing and referral policies.



BILLING AND REFERRAL POLICIES:

Please feel free to contact our office if you have any questions or need clarification.

We would like to make you aware that we accept most insurances, but we **do not accept** the following insurances:

- HPHC/BIDMC Select Plan
- BMC (Boston Medical Center)
- BMC / MASSHEALTH
- TUFTS SPIRIT PLAN
- TUFTS TOGETHER (not able to accept as of 03/01/2018)
- FALLON / MASSHEALTH
- BCBS / HUGHP (unless prefix is #HUA)
- BCBS SELECT SAVER PLAN
- CIGNA Local Plus or CIGNA Local Plus IN (not able to accept as of 1/1/2018)
- NETWORK HEALTH
- MASSHEALTH STANDARD (only ACO plan accepted)

BILLING POLICIES:

RESPONSIBILITY FOR PAYMENTS:

It is expected that all patient/guarantors receiving services are financially responsible for timely payment of all charges.

CO-PAYS:

Co-pays are due at the time of your visit to the office.

INSURANCE CARD:

We will ask to see your insurance card (or your child's card if your company issues one in your child's name) so that we can verify that we have the correct information. Please remember to bring your card or your child's card to the office each time that you come in. If you change insurance companies, you must notify us by sending a copy of the front and back of the card to our office.

CHANGE OF INSURANCE:

If you change health insurance companies, it is your responsibility to notify us of this fact by sending us a copy of the front and back of your insurance card (or your child's card if your company issued one to your child). Please print your child's name and date of birth on the same paper with the copy of the card so that we correctly link your child with your insurance coverage.

Please be aware that some insurance companies issue cards which require you to fill out your social security number and sign the back of the card.

Please look at your card carefully before you send a copy to us to make sure that all the necessary information is there and that your name or child's name is spelled correctly, and that your child's date of birth, if it is on the card, is correct. If there are mistakes, please call your insurance company.

MISSED VISITS:

We charge a \$25 fee if you miss a scheduled visit for a physical exam or if you do not cancel at least 1 business day in advance.

MONTHLY STATEMENTS:

We only send you a monthly statement if you have a balance due. Usually, this means that your insurance company has transferred the responsibility to you for either our entire charges or for part of the charges. If you do not agree with the transfer of charges to you by your insurance company, please call your insurance company right away to straighten out the situation.

BILLING AND INSURANCE:

As we are all aware, health insurance has become much more complicated. Centre Pediatrics currently bills to many different companies with many different plans. Some of these are “managed” and some are not. The options and coverages for these plans vary so considerably, and the number of plans, even within one company, is so numerous that we cannot keep track of the details of the various plans. We urge you to become familiar with your insurance so that you understand its rules and coverages and know whether well visits, immunizations, laboratory charges, and sick visits will be covered.

It is very important that you bring your child’s insurance card to our office each time that you visit. All insurance companies have time limits for billing claims and the HMO plans especially have strict and short filing limits. If the information that we use for billing comes directly from your insurance company via your child’s card, we have much better success in meeting those filing limits and thus avoid transferring the claims to you.

Here are a few tips. We hope these will help you in ensuring that your company pays the claims submitted by us on your behalf. If you follow these, we believe that you and we will avoid common problems:

1. When you have a baby, call your insurance company right away and inform the customer service representative that you want to:
 - add your new baby to your policy, effective as of the date of birth and
 - designate a Centre Pediatric doctor as your baby’s PCP (primary care provider) effective as of the date of the baby’s birth.
2. Write down the name of the representative with whom you speak and the date of the conversation so that you can refer back to that information if you need to.
3. If the customer service representative gives you an ID number and/or a suffix number (which some insurance companies require and some do not), write that down carefully, but stress that you want the card as soon as possible.
4. As soon as you receive your child’s card, examine it to make sure that the information is correct. You may need to add your social security number and signature to the back of the card.
5. Once the card has the correct information, make a copy of both sides of it, put your child’s name and date of birth on the copy, and send it to our office, to the attention of the billing department. Or if your next visit is in the near future, bring the card with you and we will copy it.
6. If you change insurance, please notify us as soon as possible with a copy of your new insurance card(s), and the effective date of the new policy. Call us to inform us about any changes in your insurance. And don’t forget to designate a PCP for your child with your new insurance company.
7. We will only send you a statement for balances that are your responsibility. If you have questions about our statements, please call us right away. We may be able to re-bill your insurance company, but since some insurance companies have strict filing limits, we need to deal with any problems as soon as we can.
8. Most insurance companies will send an EOB (Explanation of Benefits) to you about the claim that the company is or is not paying. If you do not understand it or have questions, call your insurance company as soon as possible.

We hope that these few tips will facilitate the billing to your insurance company.

REFERRALS:

Referrals – Please note this information is on our Website www.centrepediatrics.org and you may click in to access the forms as noted below.

Many health insurance plans, especially managed plans like HMO's, require you to receive approval from your pediatrician (PCP) before you take your child to a specialist and then you must obtain a referral number.

Please be aware that insurance companies can deny payment for services even if you have a referral. You must call your insurance company directly about what services may not be covered.

If your insurance is the "managed" type (if you don't know, call your insurance company), please follow these steps:

Step 1: Verify with your company that you need a referral. Even if your insurance is managed, you may not need a referral for some services. Example: most companies do not require a referral for annual or biannual eye exams, or for laboratory tests. Most companies have PPO plans that do not require referrals. Check with your company before you begin the referral process.

Step 2: Speak with your pediatrician or nurse practitioner about the need for a referral and receive medical approval for that referral. Although you no longer need a referral for emergency room visits, it is wise to call first because your pediatrician or nurse practitioner can often expedite your emergency room visit if one is necessary.

Step 3: Make an appointment with the specialist whom your provider has referred you to. When you call the specialist, be sure to ask for the specialist's provider ID number for the type of insurance that you have and the specialist's NPI number. At that time, please confirm that the specialist is a member of your health insurance network; otherwise you may be subject to "out of network" costs.

Step 4: Inform our referral coordinator of the information necessary to process your referral paperwork. You can do that in these ways:

1. [Click here](#) to fill out our online Referral Request Form. Furnish the information requested and click on submit.
2. Pick up our Referral Request Form in our office and fill it out when you come to the office or you can mail or fax it back to us.
3. [Click here](#) to download a printable (PDF) copy of the Referral Request Form that you can print, fill out, and mail or fax to us.
4. Call the Centre Pediatrics referral line at (617) 735-8585, Option 4. Leave us your full name, your child's name, your address, and your fax number if you have one. We will mail or fax to you our Referral Request Form which you complete and mail or fax back to us.

Step 5: You may also request a referral via Patient Gateway.

It takes approximately 5 business days to process your referral. Most referrals are now electronic, so there is no hard copy. Your specialist should be able to access your referral information via the POS device or over the telephone. If you have questions, please contact our Referral Coordinator at (617) 735-8585.

The Truth about Referrals

Myth: Your Centre Pediatrics Primary Care Physician (PCP) or nurse practitioner notifies the Centre Pediatrics referral coordinator or your insurance company of your need to take your child to a specialist.

Fact: No, the providers do not notify the referral coordinator or your insurance company. We rely on you to provide the information about your referral since frequently the specialist whom you will see or the time of the appointment changes. Please fill out our referral request form so that we have all of the information that we need to process your referral. You can submit this form to us over our web site or you can call our referral line (617) 735-8585, Option 4, to leave us your fax number or address so that we can fax or mail the form to you. You can also pick up the form in our office.

Myth: Your Centre Pediatrics PCP or nurse practitioner knows which specialists take your insurance.

Fact: With so many insurance companies, it is impossible for your Centre Pediatrics PCP or nurse practitioner to know which specialists are approved by your company. Make sure that you ask the specialist's office if that specialist takes your insurance when you set up your appointment. If the specialist does not take your insurance, you may be subject to "out of network" costs.

Myth: If you haven't received a copy, your referral hasn't been processed.

Fact: Most referrals are now electronic via a machine called a POS device or via the telephone. Therefore, there are no hard copies. Your specialist should be able to access the information via the POS device or the telephone. Some referrals are done verbally and you or your specialist will be called with the referral number.

Myth: Your referral was processed so you won't be getting bills from the specialist's office.

Fact: Our office can process a referral, but an insurance company can still deny coverage. Each company has different benefits and different plans within that company. What a company covers under your plan is based on your individual or group policy. It is your responsibility to know what coverage your insurance company allows. You may also be responsible for co-payments or deductibles. Call your insurance company to be sure.

Myth: The specialist's office knows you will need a referral and will obtain one for you.

Fact: Again, with so many different insurance companies and plans, it is difficult to know for certain who needs a referral and who does not. In general, if you have an HMO, you will need a referral. On occasion, the specialist's office will call Centre Pediatrics for a referral, but do not depend on it. You are ultimately responsible and will have to pay for specialist's charges if you do not obtain a referral.

Referral Bulletin

Managed Care Reform, a law that became effective on January 1, 2001, has changed the referral system in two significant ways.

1. You no longer need a referral for emergency room services.
2. You no longer need a referral for ob/gyn services.