



To the Valued Patients of Health One, Inc.

Your Insurance Company may not pay for certain services. The Physician may order a service or test based on their clinical expertise and your child's medical need. If an item or service is not covered, you may be responsible for the cost.

Listed below are the most common non-covered services:

- Rapid Strep Tests
- Ear Irrigations
- Urinalysis
- Vision acuity Tests
- Hearing Tests
- Flu Vaccines
- Pregnancy Test
- Lab Test
- * Sick and Well Visits on the same day
- * More than One Well Child Visit within a year
- * Nutritional Therapy
- * Mental Health
- * Certain Surgical Procedures
- * Photo Optic exam
- * Vaccines
- * Fluoride Treatment

This list is not inclusive, nor does it mean that the list above are the only services that your insurance company may consider to be non-covered services. Insurance policies vary greatly in the benefit offered and you should contact your Insurance Company regarding specific services that may not be covered by your insurance plan.

Please understand that Health One, Inc. may bill you for non-covered services, and you may have to pay the bill while your insurance Company is making its final decision. **However, if your Insurance Company does pay, you will receive a refund for remittances made to Health One, Inc. that were your responsibility. If your Insurance Carrier denies payment, you have agreed to be personally and fully responsible for payment.**

Health One, Inc. does not want you to be surprised by a bill but we must always bill your Health Plan based on the actual services provided. Please feel free to ask questions about services that may not be paid in full by your Health Plan on the day of your visit. It is always our pleasure to help.

Sincerely,

The Providers and Billing Department of Health One, Inc.

Questions for billing? Call 614-875-3444 x 3108



TO THE VALUED PATIENTS OF HEALTH ONE, INC.

Good health care for newborns, infants, children, and adolescents begins with the **well-child visit** (checkup) and other services that help keep children healthy. **These are preventive services.** Our doctors and staff provide these services based on a plan called **Bright Futures.** The American Academy of Pediatrics (AAP) made this plan to help doctors and families know what preventive services children should receive from birth to 21 years of age, such as screening tests, and advice about staying healthy and safe. This plan can be altered to suit each child as needed. We also follow the **AAP vaccine schedule for newborns, infants, children, and adolescents.**

Preventive Services are important to keeping children healthy. The patient Protection and Affordable Care Act (health care reform law) includes a rule that all preventive care screenings and services included in the Bright Futures plan along with the CMS vaccine schedule must be covered by most health plans. This is not always true, though, as some older plans, called grandfathered plans, do not have to pay in full for preventive services.

Health Plan Terms to Know

- **Co-payment:** A fixed amount that you pay for certain health services before the health plan pays.
- **Deductible:** An amount that you must pay before the health plan pays for covered services.
- **Coinsurance:** The portion of a charge that is not paid by the health plan (usually a fixed percent of each amount paid by the plan)

WELL VISIT (PREVENTIVE) WITH A PROBLEM – This is important to understand !

There may also be times when a child needs a service that is not considered preventive on the same day AS A WELL VISIT. If a child is not well or a problem is found or needs to be addressed during the well checkup, the physician may need to provide an additional office visit service (called a sick visit) to care for the child. This is a separate definable different service and is billed to your health plan in addition to the preventive services provided on that day. If you have an office visit co-pay, deductible or coinsurance that you must pay before your health plan pays for these services, our office will charge you these amounts.

We value your time and want to make the most of each appointment for the child. This way we will address any problem that needs a provider's care during well-child visits so that only one trip is needed. Some services that may be provided and billed in addition to preventive services include:

- The provider's work to address more than a minor problem, which will be billed as an office visit (eg, if the provider gives a prescription, orders tests, or changes care for a known problem.
- Medical treatments (eg, breathing treatments, wart removal, ear wax removal, etc.)
- Any surgery (eg, removing splinters or foreign material in ears or nose)
- Tests performed in the office that are not included in the Bright Futures plan.

Our office does not want you to be surprised by a bill but must always bill your health plan based on the actual services provided. Please feel free to ask questions about services that may not be paid in full by your health plan on the day of your visit. Any benefit/coverage questions should be directed to your insurance company using the customer service number on the back of your current ID card.

Sincerely,

The Providers and Billing Department of Health One, Inc.

Questions for billing? Call 614-875-3444 x 3108