

Nadia Abu-Nijmeh, M.D. • Luis Bolanos, M.D. • Hinna Khan, M.D. • Jennifer Kleinfeld, M.D. •
Kristy M. Macellio, PA-C



OFFICE POLICY

WELCOME!!! We look forward to seeing your child for their appointment. Enclosed you will find information forms that we would like you to complete prior to your first visit. Please bring them with you for your appointment. Your clear understanding of our office policy is very important.

FIRST VISIT: Please bring your new patient forms, and your insurance card. It is a good idea to bring your card to every visit. If your insurance ever changes, it is your responsibility to let us know and bring your new card. You are required to drop off your child's updated immunization records and any medical records that pertain to your child 1 week prior to your scheduled appointment. Also bring your child's immunization records to your first visit so it can be updated, if needed at your visit. Without the immunization record on file, we will not be able to examine your child and your appointment will need to be rescheduled. You may obtain an updated immunization record from your previous doctor or your child's school. Please arrive 15 minutes before your appointment.

CONTRACTED HMO AND PPO PLANS: If our physicians are covered providers in your PPO or HMO plan, co-pay is due at time of service. The balance of your bill will be billed to your insurance company. Our office verifies that your insurance is active on the date of service, but we do not verify your benefits. If you have any questions regarding your covered benefits, please contact your insurance company prior to your visit. If you have an HMO, it is your responsibility to have one of our providers as your PCP.

NON-CONTRACTED INSURANCE AND SELF-PAY PATIENTS: If our physicians are not contracted with your insurance plan, we will bill your insurance as a courtesy, however, if the claim is denied payment is required within 30 days from receipt. If you do not have health insurance full payment for services rendered are do at time of service. We will provide you with a receipt in which you may use to file the insurance claim yourself if needed.

MINOR PATIENTS: A parent or legal guardian must accompany all minor patients (less than 18 years of age) on their visits. If a parent or legal guardian is not able to attend the patients appointment a consent form must be obtained and shown at the check in desk to have a minor seen with another adult over the age of 18 who is not their parent or legal guardian; e.g. grandparents, aunts/uncles, nanny, etc.

PAYMENT: We accept cash, check, Visa, or Master Card as forms of payments.

MISSED APPOINTMENT: If you are unable to keep your appointment, please notify our office at least 24 hours in advance. Failure to provide 24 hours notice will result in a "No Show" charge and is not billable to your insurance. Three "No Show" appointments within a one-year period will lead to dismissal from the practice.

SCHEDULING: Patients are not always called in order of arrival because appointments may be with any one of the doctors, nurses or clinical staff. We make every effort for you to be seen at your scheduled time, however; unforeseen emergencies, complicated or unusually ill patients may cause us to run behind. Please be understanding that someday your emergency or illness may affect others.

If you have any questions after reading the office policies, do not hesitate to contact our office.

2121 Ridge Ave, Suite 101,
Aurora, IL 60504
Phone: 630-820-7100 | Fax: 630-264-2524
www.associatedpediatricsfv.com