



### New Patient Information

Our patient’s healthcare and well-being is our number one priority. ACP follows the American Academy of Pediatrics (AAP) Schedule for well-child check and immunizations. Visit [https://downloads.aap.org/AAP/PDF/periodicity\\_schedule.pdf](https://downloads.aap.org/AAP/PDF/periodicity_schedule.pdf) to see the AAP periodicity schedule. ACP sees patients by scheduled appointment only. Patients who arrive at ACP without a scheduled visit will be seen at our earliest availability.

### Phone Numbers:

<i>Life-threatening Emergencies: 911</i>	<i>Our Office: 907-777-1800</i>	<i>Poison Control: 1-800-222-1222</i>
Call 911 if your child is having a life-threatening emergency. (A sudden, unexpected onset of a serious condition or illness, such as severe shortness of breath or injury, choking, convulsions, or an unresponsive child)	Call our office to make appointments, refill prescriptions, or ask questions. If you are calling with an emergency, please let the receptionist know.	Call Poison Control if you suspect that your child has swallowed a poison (medication, cleaning fluid, toxic plant, etc.)

### Clinic Hours & Appointments:

8:00 am – 5:00 pm Monday-Friday (*Closed Wednesdays from 12:00 pm – 1:15 pm*)

8:30 am – 12:00 pm Saturdays

- When scheduling an appointment, inform our receptionists of all concerns you would like addressed during your child’s appointment to allot adequate time with your provider.
- Our primary concern is safe, efficient, quality healthcare for all our patients. We believe that patients deserve our attention during the scheduled time we have reserved for them. By arriving prior to your appointment time you help maintain the flow of the schedule for all our patients.
  - **Patients arriving late for their appointment time will likely be asked to reschedule.**
- Should you need to cancel or reschedule an appointment, please call at least 24 hours in advance.

**No-Show Policy:** A No-Show is defined as:

- Not showing up for your appointment
- Not calling to cancel or reschedule your appointment
- Calling within two hours of your appointment time to cancel or reschedule
- Arriving after your scheduled appointment time
- If multiple No-Shows occur, you may be placed on a 6-month probationary same-day only scheduling status. If No-Shows persist during same-day only scheduling status, it may lead to discharge from our clinic.

**After Hours:** If you need medical advice when our office is closed, please call us at 907-777-1800. You will be directed to our off-site After-Hours Triage Nurses. The nurse will assess the concern and depending upon the severity will:

- provide home care advice and recommend follow-up care
- consult with the on-call pediatrician
- recommend that your child be seen at a local emergency room

All calls received by the After-Hours Triage Nurses are documented and forwarded to our office the following business day.

**Please do not call this service for prescription refills, to make appointments or for non-urgent concerns.**

**Patient Portal:** Email addresses provided will be enrolled in patient portal.

Patient Portal is a complimentary, secure site where patients and parents can:

- request new appointments and view currently scheduled appointments
- request prescription refills
- send and receive secure health-related messages with ACP
- update account information including address, phone numbers, email address, and insurance
- review your medical summary and patient education forms
- view current and past billing statements and pay your outstanding bills



Alaska Center for Pediatrics  
BIRTH THROUGH ADOLESCENT CARE

**Online Scheduling:** <http://www.akpeds.com/general-scheduling>

ACP now offers online scheduling for well child checks and general sick visits. More complex needs will need to be scheduled over the phone at 907-777-1800. Also, if you would like to schedule more than one child for any appointment type for the same day, please call our office to arrange your appointments.

**Prescription Renewal:** Prescriptions refills can be requested via patient portal, phone, or pharmacy request. However, there are times that an appointment with your Primary Care Provider will be **required before the prescription can be refilled**. This is to ensure that your child is receiving the best possible medical care with an appropriate medication, dosing and frequency based on your child's **current** height and weight, among other factors. **Please plan medication refill requests with 3-5 days left of medication. ACP's Medication Refill Policy permits 72 hours to process medication refill requests.**

### Alaska Center for Pediatrics Financial Policy

Our goal is to provide and maintain a trusting partnership between practice and families. Being aware of our financial policy allows for ease in communication and enables us to achieve our goal. Please read this carefully and if you have any questions, please do not hesitate to ask a member of our staff.

1. On arrival, please present your current insurance card when checking in. This verifies that we have the correct insurance and contact information on file.
2. It is your responsibility to understand your benefit plan. If ACP providers do not participate in your insurance plan, we will do our best to obtain your benefits before the date of service. If no determination can be made, payment in full is expected from you at the time of your office visit.
3. Payment is expected at the time services are rendered. You are responsible for any and all co-payments, deductibles, and/or coinsurances at the time of service. For pre-scheduled appointments, past balances must be paid prior to the visit. Not all services provided by our office are covered by every plan. Any service determined to not be covered by your plan will be the guarantor's responsibility.
4. Patients who are ineligible for insurance or newborns pending insurance more than 90 days after their birth date will be required to pay a downpayment of \$250 prior to an appointment. Any charges not covered by the downpayment will be the responsibility of the patient. Any patient payments for charges that are then retroactively covered by insurance will be refunded to the patient.
5. As a courtesy we will submit to secondary insurance plans only if there is an outstanding balance on the claim(s). It is very important to update our office of any changes in insurance policies to keep our records up to date.
6. Patient account balances are billed on a 35-day cycle on receipt of your insurance plan's explanation of benefits.
7. If previous payment arrangements have not been made with our billing office, any account balance over 90 days may be forwarded to a collection agency. Payment plans are available for those patients who are timely in their request.
8. Any checks returned for insufficient funds will be automatically forwarded to our collections agency and will incur an NSF fee and any appropriate bank fees.
9. Well-child checks are *typically* covered by most major insurance companies but not all. Verify with your insurance company whether preventive services will be covered. Some plans also do not cover hearing, vision or other screenings recommended by the AAP. It is your responsibility to know your insurance plan benefits. Any amount not covered by insurance is the guarantor's responsibility to pay.
10. It is your responsibility to know if a selected specialist participates in your plan. Keep in mind that your primary care provider must approve referrals, labs and imaging orders. It is your responsibility to know if a written referral or authorization is required to see a specialist, if preauthorization is required prior to a procedure or hospitalization, and what services are covered.
11. Complete or partial medical records are available by request with a signed Release of Information. The first copy of complete records is complimentary, any subsequent requests of complete records incur a \$50 charge per request and subsequent requests of partial records incur a \$25 charge per request.
12. **Families that are divorced, separated or unmarried - ACP does not allow more than one responsible party per family. Parents/Guardians are expected to make arrangements between themselves if they plan to split the cost of the patients' medical care. (e.g. we cannot collect half of the current charges and bill the remainder to the other parent/guardian). The responsible party will receive all financial correspondence from us. Please ensure that contact information remains current.**

For further information, please contact the ACP billing office with any questions at 907-777-1800.