

## Newborns

Payment will be collected at **time of service** for all newborn visits until we are able to verify the patient's eligibility on your insurance plan. Once coverage is verified, the billing department will then bill all claims to insurance and you will be reimbursed for payments made over and above any co-pay, co-insurance, and deductible amounts.

Sunshine Pediatrics only **bills one insurance policy**. If you add your baby to two policies, we will only bill the primary insurance (which falls under the birthday rule: whoever's birthday is first in the year is considered the guarantor of the primary insurance.)

Circumcisions are an **elective procedure**. Therefore, we require payment for this procedure at the time of service. It will then be submitted to your insurance once baby is active. If we receive payment from the insurance company, you will promptly be reimbursed.

I hereby **grant permission** to Sunshine Pediatrics of Central Florida to release any pertinent information to my insurance company upon request, and I also authorize payment directly to Sunshine Pediatrics of Central Florida. A photo static copy of this authorization shall be considered as effective and valid as the original.

Signature (parent/guarantor)	Print Name (parent/guarantor)	Date