PEDIATRIC ASSOCIATES OF NYC, P.C.



317 East 34 Street New York, NY 10016 (212) 725-6300 20 Plaza Street East Brooklyn, NY 11238 (718) 857-5500

22-18 Jackson Avenue Long Island City, NY 11101 (718) 786-5506

Understanding Your Insurance

It is important to KNOW YOUR POLICY. The relationship with your insurance carrier is between you, your employer and your insurance company. As your medical care provider, we are not privy to the specifics of your contract. We understand that at times it may be confusing as to what services/procedures are covered. All policies are different, and it is your responsibility to know the specifics of your policy. We encourage you to speak directly with your insurance company and ask the following questions.

- 1. What type of policy do I have? Commercial, PPO, HMO (Do I have to designate a primary care physician?)
- 2. Are the physicians of Pediatric Associates of NYC in network?
- 3. Do I need a referral from my primary care doctor to see a specialist?
- 4. Is there an annual deductible? If so, how much?
- 5. How many well visits are covered under my plan per year? (this changes based on your child's age)
- 6. How often are well visits allowed? (when they are yearly, is it based on the calendar year or 365 days from prior visit?
- 7. Do I have co pays for: sick visits; sell visits; after hours visits?
- 8. Do I have co-insurance responsibilities?
- 9. Does my plan cover labs done in the physician's office?
- 10. Are vision and hearing screenings covered?

If your child is covered by more than one plan you must decide which parent's insurance plan covers the child according to the "Birthday Rule". The Birthday Rule states that for a dependent child of parents who are not legally separated or divorced, the insurance of the parents whose birthday falls earlier in the year (not the actual year but the month in which the parent was born) is the primary carrier. If both parents have the same birthday, the plan that has provided coverage the longest is the primary carrier.

*****THIS IS FOR YOUR INFORMATION ONLY - Do not return to the receptionist.

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Newborn Enrollment Guide

CONGRATULATIONS! Thank you for allowing us to participate in the health and wellbeing of your growing family.

We understand insurance policies can be difficult to navigate, especially in the first few days and weeks after you have brought your baby home. We have compiled some answers and explanations to common questions we receive to make it easier to understand.

Questions/Information about coverage for your baby if each parent has their own insurance policy

- If you and your partner have different insurance policies from each other, you must decide which plan you will be adding the baby to.
- If you plan to add the baby to BOTH plans, there are specific insurance rules regarding which plan will be primary. One plan will be primary and the other policy will be secondary based on The Birthday Rule (see below)

If your child will be covered by more than one plan, the primary insurance plan for your child is determined by the "Birthday Rule". The Birthday Rule states that for a dependent child of parents who are not legally separated or divorced, the insurance of the parent whose birthday month falls earlier in the year (not the actual year, but the month in which the parent was born) is primary. If both parents have the same birthday, the plan that will provide primary coverage will be the plan that has been active the longest.

• What to do if each parent has a different insurance policy and you plan on enrolling the baby on only ONE policy?

**Please make sure you inform the billing department, 212.725.3040 if each parent has a different insurance policy and you will be adding the baby to both policies OR to just one policy. The billing office needs to know the specifics of which insurance your child will be added to anytime parents do not have the same insurance policy. Some policies have automatic enrollment and if you do not plan to enroll the child in that plan, it could delay enrollment into the correct insurance plan.

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What do I need to know about enrolling my baby on my insurance plan?

Have you enrolled your baby on your policy yet?

There is a time limit for enrollment. Each insurance company has their own policies for adding a new baby. Some policies provide automatic coverage based on the assumption that you will be adding the baby to the mothers insurance policy. However, the length of time that this auto enrollment covers can vary by insurance company. Some companies cover the first 30 days of the newborn's life, while other companies only cover the first 2 days of the newborn's life.

It is essential to contact your insurance company to learn who to contact and how to enroll your newborn. We recommend you do this prior to the birth of your baby or if just learning about this, ASAP.

In order to ensure that insurance companies pay medical claims in a timely manner and do not deny claims (based on a delay in adding the newborn), make sure you know the timing by when you must add your child. **Any denied or unpaid claims will put the financial responsibility of your visits on you.**

It is the policy of Pediatric Associates of NYC to verify active coverage for a newborn by the one month wellness appointment. If we are unable to verify active insurance coverage for the newborn, the parent will be considered "self-pay" at the time of service. This means that the parent accompanying the child will be responsible to pay for the appointment out of pocket. Out of pocket expenses will continue for all visits until we can verify active coverage. Once active coverage is verified, PANYC will submit the claims that have been paid by the parent to the insurance company for processing. Once we are paid by the insurance company, we will refund the parent in full.

Please do not hesitate to contact the billing office with any questions at 212.725.3040