



Mill Valley Pediatrics, Inc.
17853 State Route 31
Marysville, Ohio 43040
Office (937) 578-4210
Fax (937) 578-4220

Self-Pay Policy & Payment Agreement

All cash patients and patients that present without valid insurance information are considered a self-pay patient. Mill Valley Pediatrics, Inc. offers two payment options for self-pay patients based on financial need. All self-pay patients are required to pay at least 50% of the office visit charges at the time of service. Payments are accepted by cash, check, and credit card. Please keep in mind:

- If you have insurance but are unable to provide proof of coverage at time of visit, you are considered a self-pay patient. Payment is required at time of service. You are welcome to submit the claim to your insurance for reimbursement. In special circumstances, our billing office can submit the claim once insurance information has been received and verified.
- If your balance is later than 90 days overdue, we reserve the right to ask for payment in full prior to being seen in the office again.

Option 1: Prompt Pay Discount = 30% off the total bill, if payment in full is made at time of service.

Option 2: Delayed Payment Discount = 15% off the total bill, if payment in full is not made at time of service. Self-pay patients are required to pay at least 50% of the total bill at time of services rendered. Any remaining balance will be forwarded to our billing service for collection.

Please sign below to acknowledge you have read and understand our financial policy.
By signing below you agree to the terms and conditions in this agreement.

Patient Name

DOB

Parent/Guardian Signature

Date