

Aspen Pediatrics

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Special Notice for Divorced Parents Responsibility

CHILD'S NAME: _____ DATE OF BIRTH: _____

Often when a child from a divorced family is brought in for treatment numerous concerns can arise. It is important to recognize that the parent initiating services is considered the **RESPONSIBLE PARTY**, and will be financially responsible for your child's account overall. The parent who holds the insurance benefits will be considered the **INSURED**; sometimes these are the same person, but not always.

Below are important aspects of our office policies:

1. The parent who seeks the medical care for the child is responsible for any unpaid amount. Although divorced parents may have a divorce decree that establishes their financial responsibilities, we are not a party to the decree. We require the parent accompanying the child for treatment to accept primary responsibility for payment of those services.
2. Copayments are expected **at the time of service** and we expect that the parent who has brought the child to treatment that day will pay for those services. We will not bill separate balances for each parent.

*If for any reason, the co-pay is not paid at the time of service, that balance will be reflected in the child's overall account. Ultimately, the **RESPONSIBLE PARTY** will be responsible for that balance unless both parents can agree otherwise.*

PLEASE CHECK OR SIGN THE APPROPRIATE STATEMENTS BELOW:

Having read this information I understand that I am responsible for my child's co-payments **at the time of service whenever I transport my child.**

PARENT NAME: _____

PARENT SIGNATURE: _____

As the **RESPONSIBLE PARTY** I understand that I am financially responsible for the overall balance reflected on my child's account.

RESPONSIBLE PARTY'S NAME: _____

RESPONSIBLE PARTY'S SIGNATURE: _____