

Southwest Pediatrics

NEWBORN INSURANCE CHECKLIST

- Call insurance company and/or employer/union fund office within the first 30 days of birth to add baby to the insurance policy. Follow up again in two weeks to be certain that “baby is added and active since birth.” If this is not done within 30 days, depending on the insurance company and plan, baby may be ineligible for benefits. You must then wait until open enrollment to try again to add baby to your plan. This could result in all newborn charges being *“patient responsibility.”*
- If insurance is an HMO, verify that we are “in network” and then provide the insurance company with one of our doctors as the PCP. “In network” verification should be done for ALL insurance plans, not just HMO. If insurance is a BCBS HMO you must select either SITE 302 for Advocate Christ affiliation or SITE 266 for Silver Cross affiliation. These are the only sites SWP accepts. You will receive an insurance card for each child with his/her own name. Please provide SWP with that card as soon as possible. If your insurance is BLUE CARE DIRECT Site 600 must be chosen.
- Provide the insurance company/employer/union fund office with any papers they require regarding baby’s birth such as a Certified Birth Certificate (obtained through hospital or county court house), copy of Social Security number, etc.
- If you receive a Coordination of Benefits (COB) form from your insurance company, please complete, sign and return to the sender ASAP. This form provides the insurance company with information regarding secondary insurance (if applicable). Failure to return the COB in a timely manner can result in unprocessed claims. If this happens, claim charges could then be determined as *“patient responsibility.”*

As standard policy, SWP will ask that you sign a payment policy form at the front desk each time you come for a visit with the baby. Once we see that claims have been processed and paid by the insurance company, you will no longer be asked to sign this form. After insurance processes your claims, all balances are then *“patient responsibility”* and are due within 30 days.

Please contact us should you have any questions at 708-361-3300.