

100 East Street, SE
Suite 301
Vienna, VA 22180
703.938.5555
www.advancedpediatrics.com

## **Contactless Auto-Pay Credit Card Authorization Form**

Advanced Pediatrics is offering a secure and convenient method of payment for the portion of services that your insurance doesn't cover, but for which you are liable. Your credit card information is kept confidential and secure.

I authorize Advanced Pediatrics to capture my credit card information and securely store my credit card on file.

I authorize Advanced Pediatrics to charge my credit card on file for any co-payments on the date of service and to charge any balance owed <u>after</u> insurance processing the services.

This authorization relates to all balances not covered by my insurance company for services provided by Advanced Pediatrics. This could be amounts resulting from balances related to copayment, deductible, co-insurance, non-covered services, or denials for no coverage/eligibility but is not limited to these scenarios.

I understand that this form is valid until I give a 30-day written notice to cancel the authorization to Advanced Pediatrics. Written notice must be submitted to Advanced Pediatrics, 100 East Street SE, Suite 301, Vienna, VA 22180.

I certify that I am an authorized user of this credit card and that I will not dispute the payment with my credit card company; so long as the transaction corresponds to the terms indicated in this form.

Signature :	
Date :	
Credit Card Number :	
Expiration Date:/	
CVV Code :	_
Account #:	

## **Contactless Auto-Pay Credit Card Authorization FAQ**

#### Q: How does the automatic billing process work?

A: Your credit card will be captured today and stored securely. Your credit card on file will only be charged when you have a balance owed on your account for co-payments, co-insurance deductible or **for a non-covered service.** 

## Q: How will I know how much you are going to charge me?

A: You will receive an explanation of benefit from your insurance carrier that explains exactly, according to your health insurance coverage and benefits, how much of your healthcare bill is your responsibility and how much the insurance paid along with any contractual adjustments.

## Q: What if I need to dispute my bill?

A: We will only charge the amount that we are instructed by your insurance carrier to collect from you in the same way that we normally determine how much to send you a statement for in the mail. If you disagree with how your insurance carrier processed the claim you will need to contact their customer service department directly.

# Q: Will I receive a statement or receipt for the charges automatically billed to my card?

A: Not automatically. Your insurance carrier EOB and your credit card statement will be your receipt. You can at any time contact us to have an account itemization emailed to you.

# Q: What is a deductible?

A: An annual deductible is the dollar amount you must pay out of your own pocketing during your plan year for medical expenses before your insurance begins to pay. For example, if the policy has a \$1,000 deductible, you must pay the first \$1,000 of medical expenses before your insurance will begin to pay. Your insurance company must receive a claim to process in order to apply balances towards your deductible. Even if you have a high deductible plan we encourage you to have us submit the claim to your insurance so you receive a contractual adjustment and the services can be applied towards your deductible.

#### Q: Is my credit card secure?

A: Yes, we do not store your sensitive credit card information in our office. Keeping your card on file, offsite1 in an encrypted payment gateway actual enhances security because it reduces exposure at each visit.

