

PRE-AUTHORIZED HEALTH CARE FORM

Many clients have told us that it would be more convenient for them to use their credit card for payment of fees. We are now able to take credit cards. We have worked to come up with an efficient, safe and secure means for the use of credit cards. If you would like to use your credit card for payment of fees, please fill out the information below.

I authorize _____
(Provider Name)

To keep my signature on file and to charge my account for:

1. Balances of charges not paid by insurance within 90 days and not to exceed \$ _____ for:
__ this visit only
__ all visits this year
2. Recurring charges (on-going treatment) of \$ _____ every _____ from _____ to _____ .
(frequency) (date) (date)

I assign my insurance benefits to the provider listed above. I understand that this form is valid for 4 years unless I cancel the authorization through written notice to the provider.

Patient's name _____

Card Holder's Name _____

Card Holder's Address _____

City _____ State _____ Zip _____

VISA MasterCard Discover Account # _____

Signature _____ Exp. Date ____/____/____

QUESTIONS & ANSWERS ABOUT CREDIT CARD PRE-AUTHORIZATION

Q. What is the pre-authorized payment procedure?

A. It's a convenient payment method in which you authorize your doctor or provider to automatically bill your credit card account for charges not covered by your insurance, or for recurring treatments. All charges must be in accordance with your agreement.

Q. May I set a limit or a ceiling for the amount my health care provider can automatically bill?

A. Yes. Just indicate the maximum amount in the appropriate section of the form.

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

A. You will receive a copy of the Pre-Authorized Health Care Form from your provider. All authorized charges will appear on your monthly statement, just like any purchase.

Q. Can my account be charged for amounts or time periods not specified on the form?

A. No, your doctor or provider is only authorized to bill your account up to the maximum amount – during the specified time period – that you indicate on the form.

Q. How does the pre-authorized payment procedure work?

A. It starts when you fill out a Pre-Authorized Health Care Form for your doctor or provider, along with your insurance paperwork. This form works in two ways:

- The form can be used to specify that insurance payments are to be made directly to your provider. Once your health care provider receives payment from your insurance company, he/she will bill your credit card account automatically for any fees not covered by your insurance, including deductibles and co-payments.
- Or use the form to automatically bill your credit card account for recurring visits. Simply specify the amount, frequency and treatment dates on the form.