



## **CREDIT CARD POLICY**

In order to make sure that we can collect your portion of the bill once your insurance company processes claims, we require that a valid credit card or debit card be kept on file with the practice.

Your credit card information is kept confidential and secure. Your card will only be charged the outstanding amount that your insurance company determines to be 'patient responsibility', as spelled out in your Explanation of Benefits (EOB). If we do not receive payment for the amount listed on your statement within 14 days, we will run the credit card on file with the full amount owed. Once your card is charged, a receipt will be sent to you by email.

If you would like to make arrangements to pay the amount by installments, please notify the office in advance.

I understand, authorize and request Kids First Pediatrics to charge my credit card, as provided, for balances due for services rendered by my insurance company for services provided to me by Kids First Pediatrics.

This authorization will remain in effect until I cancel this authorization. To cancel this authorization, I must give a 60 day notification to Kids First Pediatrics in writing and the account may be in good standing.

Patient's Name (Print) \_\_\_\_\_

Cardholder's Name \_\_\_\_\_

Cardholder's Signature \_\_\_\_\_

Date \_\_\_\_\_

## **ADMINISTRATIVE FEE POLICY**

At Kids First Pediatrics, coordination of care is central to making sure that children get good quality healthcare. This means many services are provided to our patients that insurance does not pay for. At Kids First Pediatrics, we offer a patient portal where you are able to access medical records, print immunization records, request forms, and send messages to office staff.

We also offer services including processing various administrative requests, handling refill requests outside of office visits, providing after hours calls to parents, performing phone consultation with other pediatric specialists, and filling out any forms needed for school or camp without charging a fee for each form. To cover these services, we charge a small annual administrative fee of \$25 per family. This administrative fee will be charged to the credit card on file annually on September 30.

Print Name \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_