



Credit Card on File Policy

Beginning January 1st, 2025, Pediatric Associates will implement updated billing practices regarding patient payments.

We now require all patients to have a credit card on file to cover deductibles, copays, and any outstanding balances.

As healthcare continues to change, patients are taking on more responsibility for their medical bills. To help make sure that these payments are made on time, it's important for us to have a clear agreement about payment in our office. This way, we can work together to manage your healthcare costs smoothly and ensure that you receive the care you need without any worries about payments.

Keeping a credit card on file offers several benefits for both you and our staff. It helps save time during your visits, allowing us to focus more on providing you and your children with the care you need. This is especially useful when your child is seen by a family member who is not a parent or guardian, or when they need a virtual appointment. Additionally, having a card on file means we can reduce our environmental impact by cutting down on paper statements. Your convenience and our commitment to care go hand in hand!

When do I give my credit card?

During your next visit, you will need to provide your credit card information as part of the intake process. The card-on-file agreements in our EMR system, Athena, are valid for one year.

When will you charge my credit card?

We recognize that many patients possess HSA accounts and may wish to use them for copays from time to time. To accommodate this, we want to give you sufficient time to do so. Therefore, we have implemented a policy: any copays that remain unpaid after 30 days will be charged to the card we have on file.

Payment plans established in your agreement will incur a recurring monthly fee for individuals with outstanding balances. The patient receives an email notification regarding upcoming charges five days prior to the transaction, and again when the credit card is processed. Additionally, the patient will get an email receipt once the card has been charged. Please note that a valid email address is necessary for card-on-file agreements.

If you have a deductible plan, we will take care of filing your insurance claim for you. After that, we will wait to receive the Explanation of Benefits (EOB) from your insurance. Once we get the EOB for your

visit, we will update your account with the amount you are responsible for paying. If there are any unpaid amounts after 30 days, we will charge the card you have on file for the exact amount stated in the EOB. If you have any questions or need assistance, feel free to reach out!

Your credit card information will be securely stored in the patient's chart within our EMR system, Athena. This system is designed to be both secure and PCI compliant, ensuring the protection of your sensitive data.

What is a Deductible and How Does It Affect Me?

An annual deductible is an important concept in health insurance. It represents the amount you need to spend out of your own pocket on medical expenses each year before your insurance begins to contribute. For example, if your deductible is set at \$2,500, you'll need to pay that amount for your medical costs before your insurance starts covering any of your expenses.

Deductibles usually reset at the start of your plan year, which is often January 1 or July 1, though it can begin on any date specified by your plan. It's also worth noting that many insurance plans come with co-insurance. This means that after you've met your deductible, you'll still be responsible for a percentage of the costs for covered healthcare services. Understanding these terms can help you navigate your healthcare expenses more effectively.

How will I know when my deductible has been met?

Contact your insurance provider or visit their website to find out how much of your deductible has been met. After each medical service, you will receive an Explanation of Benefits (EOB) from your insurer, typically sent via mail or email. The EOB outlines how much your insurance covered, whether any amounts contributed to your deductible or coinsurance, and what you are required to pay.