



To Our Patients:

Due to the increasing cost of collections and the decreasing reimbursement from your insurance company and from patients who owe for co-pays and deductible we have instituted a credit card policy. We will initially, as a courtesy to you do the billing paper work for you. As you know once your insurance determines what it will and will not pay a statement (called an EOB) from your insurance will be sent to you. This tells you what your insurance will cover and what you owe based on your policy.

When you check in you will be asked for your credit card information which is held securely in your file.

After your insurance has paid their portion and notified you and our company of your share the remaining balance owed by you will be charged to your credit card and a copy of the charge will be mailed to you.

This is an advantage to both you and our company, since it makes checkout faster and more efficient, eliminates writing and mailing checks, adjudicates your balance owed in a timely manner, and eliminates many man hours preparing and sending statements. The combination will benefit everybody in helping to keep the cost of health care down.

This in no way will compromise your ability to dispute a charge or question your insurance company's determination of payment.

Co-pays and deductibles due at the time of the visit will, of course, still be collected.

If you have any questions about this payment method, do not hesitate to ask.

Sincerely yours,
Dermatology Surgery Center

I authorize the Dermatology Surgery Center, to charge outstanding balances on my account to the following credit card:

Visa

Master Card

Account Number: _____ **Expiration Date:** _____

Name on Card (please print): _____

Signature: _____ **Date:** _____