

*Taking Steps Together* 

**Patient Information Regarding Credit Card on File Policy**

We have implemented a policy requiring a credit card held on file. As you may be aware, the current healthcare market has resulted in insurance policies increasingly transferring costs to you, the insured. Some insurance plans require deductibles and copayments in amounts not known to you or us at the time of your visit.

Similar to hotels and car rental agencies, you are asked for a credit card number at the time you check in and the information will be held securely until your insurances have paid their portion and notified us of the amount of your share, then you will receive a statement. This card can be charged for the following reasons:

- Visit payments not collected from you at the beginning of your visit
- No show or late cancellation charges
- Insurance discrepancies that are not resolved within 90 days of the date of service
- Outstanding balance greater than 90 days past due

This is an advantage since it makes check out easier, faster, and more efficient. This in no way will compromise your ability to dispute a charge or question your insurance company's determination of payment.

Client's Name		Cardholder's Name	
Email		Phone Number	
Billing Address		City, State, Zip Code	
Credit Card #		Expiration Date	
CVV			

By signing this form, I am authorizing Lifespan Behavioral Health to charge my credit card for copays 24 hours prior to the session, and any balances that are left after insurance payments.

Signature: \_\_\_\_\_

Relationship to Patient: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

**Office Use Only**

Client ID \_\_\_\_\_