

## Robert Jackman Psychotherapy – Credit Card on File Policy

Effective October 1, 2025

### Why we're requesting a credit card on file:

To make payments easier and more secure, we're introducing a **Credit Card on File** system — similar to what you've experienced when booking a hotel or renting a car. With your credit card on file you will not need to go into the patient portal to pay your balance as this will automatically occur as we receive your explanation of benefits each month.

Your card will only be charged if there's a balance due after your insurance has processed your claim. All card information is stored securely, encrypted, and kept off-site — never in our office.

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### How it works

1. **At your first visit** – We'll ask for your credit card information. (HSA and Primary Card)
  2. **Secure storage** – Your card details are encrypted and stored safely by our payment processor (Medical Office Services, Inc.). We never keep your full card number in our office.
  3. **After your visit** – Once we receive your Explanation of Benefits (EOB) from your insurance company, we'll email you a statement (sent the first week of the month).
  4. **Payment** – If there's a balance you're responsible for, your card will be charged for that amount.
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### Benefits for you

With a card on file, you can:

- AutoPay balances and co-pays quickly and easily with your preferred card
- If you have an HSA account we process that card first, then go to your Primary card.
- Receive email notifications and receipts for every charge

You still have **all your rights** to dispute charges or question your insurance company's decisions. You can always check your activity through the patient portal throughout the month.

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### **When will my card be charged?**

After your insurance processes your claim, you'll receive a statement from [statements@medicalofficeservicesinc.com](mailto:statements@medicalofficeservicesinc.com) showing your balance and we'll charge your card for the amount owed. Statements usually are emailed the first week of each month if you have a balance due. You will not receive a statement if you do not have a balance.

- Charges will appear on your card for the amount due for copays and/or after we have received your EOB
- **No-show or late cancellation fees** (\$100. Late cancel fee – less than 24 hours notice, \$190.00 no-show, no call fee). Your appointment time of 55 minutes is reserved specifically for you and no one else. We appreciate you honoring of your appointment time and if need be, cancelling with more than 24 hours notice. (If you're not able to make it in for your appointment we can have a virtual session). Exceptions may be made for emergencies.

I acknowledge that my primary card (not HSA card) will be used to charge late or no show/no call missed appointments. We are not responsible for any debit card charges if you choose to register a debit card instead of a credit card.

Please initial your understanding: \_\_\_\_\_

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### **Frequently Asked Questions**

#### **What's a deductible?**

It's the amount you pay out of pocket each year before your insurance starts covering costs. For example, with a \$1,000 deductible, you pay the first \$1,000 of medical expenses that are submitted to insurance. Claims submitted from all of your medical providers usually go towards your co-insurance or deductible until it is met.

#### **When do I pay for services?**

You're responsible for all charges until your deductible and any co-insurance are met.

#### **How will I know my balance?**

You can check your deductible status with your insurance company anytime. We'll also review your EOB and send you a statement showing exactly what you owe.

#### **Why do I need this if I always pay my bills?**

We apply this policy to all patients to keep things fair and to make payments faster and easier.

**Is my information safe?**

Yes. Under HIPAA, your credit card is considered protected health information. It's encrypted, stored securely off-site, and never kept in our office.

**What if I don't have a credit card?**

You can use a debit card, HSA, or Flex Plan card. If that's not possible, we can arrange a payment plan, cash, check, Venmo or Zelle. A reminder that if you choose to use a debit card we are not responsible for any debit card charges.

**Is this like signing a blank check?**

No. It's just like a hotel or rental car hold. You can contact Medical Office Services, Inc. (847-526-0100) if you have any questions regarding your claim status, the amount your insurance company paid and what you owe. You can also check this anytime through the patient portal.

**What if I pay on my own?**

You will be billed for the amount owed based on the patient agreement you signed on intake.

**Is this "balance billing"?**

No. We only charge you the amount your insurance says is your responsibility — never more than the contracted rate. Approved plans that we accept and process PPO insurance claims: BCBS, Aetna, Magellan and Humana. We do not submit claims to any other insurance that Robert Jackman Psychotherapy is not contracted with.

**What if my card expires or is declined?**

We'll contact you to update your information. You are responsible for any balance.

**Can I change my card on file?**

Yes, anytime.

**What if I think there's a billing error?**

We'll review it with you and issue a refund if there's a mistake.

**When do I give you my card?**

At your first visit, by phone, or by mail. Once entered into our secure system, your full card number is destroyed — we only see the last four digits.

**Questions?**

We're happy to help. 📞 Call our Billing Office at **847-526-0100**.

I acknowledge that I have read and understood the Credit Card on File policy:

Please sign \_\_\_\_\_ Date: \_\_\_\_\_

**Robert Jackman Psychotherapy****Credit Card Authorization Form**

I authorize **Robert Jackman Psychotherapy** and **Medical Office Services Inc.** (the billing service for Robert Jackman Psychotherapy) to keep my signature on file and to charge my credit card(s) listed below for agreed upon charges, in accordance with the **Credit Card on File Policy**. I understand this authorization will remain in effect until I provide written notice of cancellation.

**Health Savings Account HSA (This will be used before your primary card) NOTE: HSA cards cannot be used to pay for missed appointments and your primary card will be used instead.**

**HSA Credit Card Type** (circle one): Visa   MasterCard   Discover   Amex

**Credit Card Number:** \_\_\_\_\_

**Security Code:** \_\_\_\_\_ **Expiration Date (MM/YY):** \_\_\_\_\_

**Name on Card:** \_\_\_\_\_

**Primary Card to Charge (after HSA card is used)**

**Credit Card Type** (circle one): Visa   MasterCard   Discover   Amex

**Credit Card Number:** \_\_\_\_\_

**Security Code:** \_\_\_\_\_ **Expiration Date (MM/YY):** \_\_\_\_\_

**Name on Card:** \_\_\_\_\_

**HSA/Primary Card Billing Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Patient Name:** \_\_\_\_\_

**Date of Birth:** \_\_\_\_\_

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Your card will only be charged for balances you owe after insurance has processed your claim and we have received your EOB – Explanation of Benefits. Card details are encrypted and stored securely off-site; only the last 4 digits are visible to staff. You may update your card information at any time. Thank you.



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PSYCHOTHERAPY