



**Dr. Ankit B. Shah, MD, MPH, FACC**  
8401 Connecticut Avenue, Suite 104  
Chevy Chase, MD 20815  
Office: 240.892.7070  
Fax: 240.248.0606

## **Credit Card on File Agreement**

**Page 1 of 1**

Effective August 28<sup>th</sup>, 2023, all patients will be required to keep a valid credit card on file. This credit card may be charged to pay any balance due on your account. Co-payments are still due at the time of service. At registration and/or check-in, your credit card information will be obtained and securely stored on InstaMed<sup>®</sup>, which is a wholly owned subsidiary of JPMorgan Chase Bank, N.A., that is certified for healthcare and payment security and compliance.

This “Card-on-File” program simplifies payment for you and eases the administrative burden on our office. It reduces paperwork and ultimately helps lower the cost of healthcare. If you have any questions about the Card-on-File program, please do not hesitate to let us know.

I agree to provide Sports & Performance Cardiology LLC with a valid credit card pursuant to the Card-on-File program. I agree to provide Sports & Performance Cardiology LLC with updated credit card information should my credit card on file change or expire. I understand that if the credit card information on file is not kept up to date, I may be asked for a new credit card to be kept on file, pursuant to this same agreement, before new services can be rendered.

I authorize Sports & Performance Cardiology LLC to charge my credit card on file for co-payments, co-insurance, out-of-pocket payments, outstanding balances, and no-show fees. *I understand that I will be notified in-person, or by email/phone/mail, in advance of any charge made to my credit card on file, and may choose at that time to make the payment by cash, check, or a different credit card.* I understand that I will receive a receipt for any charge made to my credit card on file.

I certify that I am an authorized user of the credit card on file and that I will not dispute the payment with my credit card company, so long as the transaction corresponds to the terms indicated in this agreement.

By signing below, I authorize Sports & Performance Cardiology LLC to capture my credit card information and have it stored securely on InstaMed<sup>®</sup> and to charge my credit card when any of the above balances are due.

**Patient Name:**

**Date:**

**Patient Signature:**

## Frequently Asked Questions Regarding the Credit Card on File Agreement

### How much and when will money be taken from my account?

What you owe will depend on your individual policy. For every visit or procedure, your insurance company mails an Explanation of Benefits (EOB) to you. This document shows how much your insurance paid and what you need to pay based on the benefits and the deductible of your policy. This office receives the same information as you do, along with payment from your Insurance Company. We apply the payment and make any discount or adjustment as per our contract with your Insurance Company. The balance on your account for that visit or procedure will then match the patient responsibility amount on your EOB.

Once the insurance explanation of benefits is received and posted to your account, you will be sent a statement showing your portion. You will have five (5) days to send an alternative form of payment if you prefer. If no alternative payment is received, your patient financial responsibility will be processed.

### How do you safeguard the credit information you keep on file?

Your credit card information is stored on InstaMed®, which is a wholly owned subsidiary of JPMorgan Chase Bank, N.A., that is certified at the highest levels for both healthcare and payments security and compliance.

### What are the benefits?

It saves you time and eliminates the need to write checks, buy stamps or worry about delays in the mail. It also allows us the chance to refund patients easily, if necessary. It also drives our administrative costs down because our staff sends out fewer statements and spends less time taking credit card information over the phone or entering it from the billing slips sent in the mail, which are less secure methods than us storing the information. The extra time the staff has can now be spent on directly helping the patients, either over the phone, with insurance claims or in person.

### I always pay my bills on time. Why do I have to do this?

The entire billing process is time-consuming and wasteful, and the few patients that we send to the collection agency end up costing a lot of money. Reducing unnecessary costs is essential for us to continue to be allowed as an in-network provider with most insurance companies. **This program does not change how much you end up paying.**

### What if there is a payment discrepancy or I have other payment questions?

Please contact us at (240)892-7070. This policy in no way compromises your ability to dispute a charge or questions your insurance company's explanation of benefits.

### Will I still receive a statement?

Yes. You will receive one billing statement by email which will show what will be charged to your card in five (5) days. If you prefer to pay your bill by an alternative method, you may do so during that period. If you do not wish to make any payment method changes, just hold onto the statement for your records and your card on file will be charged. We will send a receipt to your email on file.