



Women's Health Specialists

To Our Patients:

As you know if you have ever checked into a hotel or rented a car, the first thing you are asked for is a credit card, which is imprinted and later used to pay your bill.

This is an advantage for both you and the hotel or rental company, since it makes checkout faster, easier, and more efficient.

We have implemented a similar policy, effective September 1, 2006. You will be 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. At that time, any remaining balance owed by you will be charged to your credit card, and a copy of the charge will be mailed to you. We currently accept Visa, Mastercard and Discover.

This will be a advantage to you, since you will no longer have to write out and mail us checks. It will be an advantage to us as well, since it will greatly decrease the number of statements that we have to generate and send out. The combination will benefit everyone in helping to keep the cost of health care down.

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

Copayments due at the time of visit will, of course, still be due at the time of visit.

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

Thank You,

Women's Health Specialists

Margie Aleman-Martin M.D.
Siobhan Calhoun M.D.
Scott Kramer M.D.
Elizabeth Kurkjian M.D.
Stacie Macdonald M.D.
Alison Slack, M.D.

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Women's Health Specialists

Account# _____
(office use only)

I authorize Women's Health Specialists to charge my credit card any balance owed on my account. I understand I may not be notified prior to my credit card being charged.

I understand that a copy of the charge will be mailed to me for my records.

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

Signature

Date

Print

SS#

Address

Zip Code

Type of credit card (please circle one) Visa MasterCard Discover

Credit card number _____

Exp ____/____
mm/yr

Card holder name (please print) _____

Please be prepared to show credit card to the receptionist upon check-in .

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