

Electronic Payment for Records-External

<u>Note</u>: The electronic payment portal is accessible only through the QR code or the hyperlink provided on your invoice; it cannot be found via online search.

1. To ensure your payment is processed correctly all items must be completed as follows:

C Scripps	Scripps ROI Online Pymt 10790 Rancho Bernardo Road 4S-ROI, San Diego, CA 92127 (760) 633-7746		
	Patient Information		
	Patient First Name Patient Last Name		
	Patient Email Address		
	Requestor Name and/or Company Name		
	NEXT		

a. **Invoice Number:** located at the bottom of the 2nd page of invoice

PLEASE DETACH AND RETURN WITH PAYMENT				
Patient: Test,Ace Release ID: 194103872 Requested by: Test, Ace				
Invoice Number: 518770				
Total Amount Due. 545.00 Tax ID. 95-1064069				
Send payment to: PO BOX 235498 Encinitas, CA 92023-5498				

- b. Patient First Name
- c. Patient Last Name
- d. Email address: email address of the requestor and/or patient
- e. **Requestor Name and/or Company Name:** name/company name of 3rd party (of applicable)



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- 2. Click Next
- 3. Enter payment amount due and all 6 fields required to process the credit card payment.

Payment Method	Payment Amount	
Card Number Geogle Pay Geogle Pay Add Credit/Debit Card Name on Card Enter your name as it appears on your card. Card Number MIN		ayment Method
Add Credit/Debit Card Name on Card Enter your name as it appears on your card. Card Number		GPay) Google Pay
Name on Card Enter your name as it appears on your card. Card Number	it Card	Add Credit/De
Enter your name as it appears on your card.		Name on Card
Card Number	your card.	Enter your name as it appears o
	VISA 🔤	Card Number
Exp Date	cvv	Exp Date
Country United States	ZIP Code	Country

4. The total amount due is found on your Scripps ROI Invoice under "Balance Due."



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		1
Paper Page Number		
DVD	1	
Cost of Records	25.00	
Nucleus.io Imaging: \$6.50		
DVD-Patient: \$6.50		
DVD: \$25.00		
Paper - \$.10/Page over 50 pages		
Electronic Media - \$.02/Page over 250 pages		
Other Fees	45.00	
Processing Fee	15.00	
Total Charges	40.00	
Amount Paid	15.00	
Write-Off Amount	0.00	
Balance Due	25.00	
Enclosed are the medical records that you have	ve requested.	
Release ID: 185926366		Page 1