

## Paying Patient Payments on Portal

The screenshot shows the All Star Pediatrics patient portal interface. At the top right, contact information is provided: 702 Gordon Drive, Exton, PA 19341, Phone: (610) 363-1330, and Fax: (610) 524-8574. The main content area is titled "Current Patient" and "Online Patient Services". Below this, there are tabs for "Family", "My Account", "Patient Information", and "Appointments and Requests". A section titled "Items assigned to you" shows a message: "You have no tasks to complete right now." Below this, a section titled "Click on your child's name to access their information" contains a table with patient details. The table has columns for Patient name, Sex, Date of birth, Upcoming appointment(s), Registration Date, and Balance due. The row for MARY TESTPATIENT shows a balance due of \$ 35.00 with a "[Pay now]" link. A red box highlights the "Balance due" column and the "[Pay now]" link. Below the table, there is a disclaimer: "This Patient Portal provides access to confidential medical information that constitutes a 'disclosure' protected under HIPAA regulations. If this page, or any subsequent page on this site, contains the names or information of any patients for whom you are not legally entitled to access to such information, you must logout immediately and notify All Star Pediatrics of the error."

Patient name	Sex	Date of birth	Upcoming appointment(s)	Registration Date	Balance due
MARY TESTPATIENT	F	05/16/1998		05/16/2000	\$ 35.00 [Pay now]

Patient has a balance: This amount shows under “Balance Due”. Active text says “Pay now”.

Click on “Pay Now”.

This opens the payment screen (shown on next page.) It is not necessary to log-in again on this page.

Patient/Parent enters:

- Phone number (Required. System does not populate this because it must be the phone number of the person who is paying.)
- Card Holder Name
- Pick Card Type from dropdown (Mastercard, Visa, Discover)
- Card Number
- Exp/Date
- CVN
- Amount (auto-populates but can be changed.)
- Address (auto-populates but can be changed.)

Patient/Parent clicks “Next” button at footer of screen.

Next window confirms all payment info, and Patient/Parent clicks “Confirm” to put through payment.

A printable/email-able receipt is generated.

**\*\*IMPORTANT NOTE:** Patient online credit card payments will not be reflected in the portal until All Star staff posts the payment against the amount due. This occurs on next business day.



[Help](#)

### Secure Login

Please login to view your statements and payment history, and access your profile.

Email

Password

[Forgot your password?](#)

## Patient

\*Bold fields are required

**Patient ID**

**Last Name**

**First Name**

**Phone #**

**Invoice #**

Not registered yet?  
[Click here to register!](#)

[Why register?](#)

Not your healthcare provider?  
[Find a Provider](#)

## Payment Information

**Card Holder Name**

**Card Type**

**Card Number**  **Exp Date**  (MM/YY)

**CVN**  [What is this?](#)

**Amount**

## Account Information

**Street 1**

**Street 2**

**City**

**State**  **Zip**

**Country**

Your credit card/bank account will not be charged until all information is confirmed in the next step.

