

# ChaseHealthAdvance<sup>SM</sup>

FINANCING OPTIONS

Payment plans for the care you need.

**12, 18 & 24 MONTH NO INTEREST PLANS**  
**EXTENDED PAYMENT PLANS**



## New ways to afford the new you with ChaseHealthAdvance.

With our convenient payment plans, a simple application process and an instant decision, you can schedule your treatment today and pay for it over time.

### A simple, quick and confidential application process

#### In office:

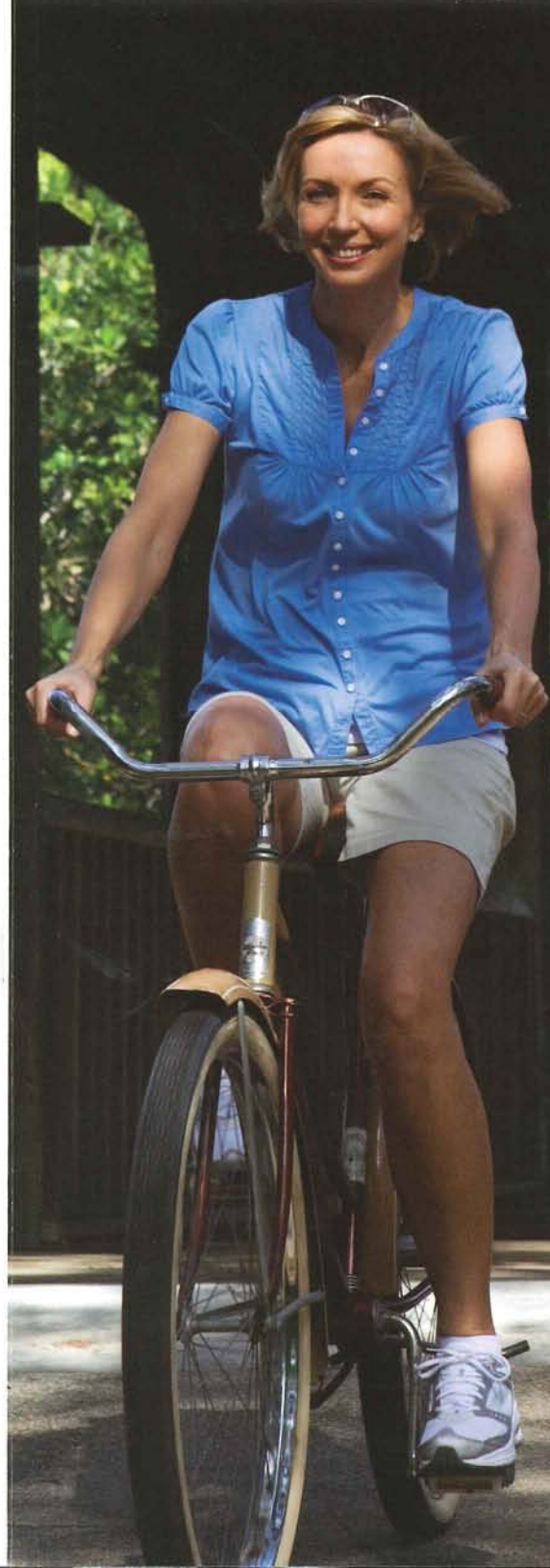
Your provider's office can submit an application online or by fax and get an instant decision.

#### Online:

Go to [www.chasehealthadvance.com](http://www.chasehealthadvance.com), apply directly, then call your provider's office to schedule treatment.

#### By phone:

Call 800-510-5638 to apply and receive your credit decision while on the phone.



## Estimate Your Monthly Payments\*

Use the payment chart below to estimate the monthly payments needed to pay off your balance(s) during the promotional period that applies to them. Examples shown are for the 12, 18 and 24 Month No Interest Plans and Extended Plans up to 48 months.

Treatment Fee	No Interest Payment Plan		Extended Payment Plan	
	Number of Months	Estimated Monthly Payment	Number of Months	Estimated Monthly Payment
\$1,000	12 months	\$84	24	\$48 - \$55
\$1,500	12 months	\$126	24	\$71 - \$83
\$2,000	18 months	\$112	24	\$94 - \$110
\$2,500	18 months	\$140	36	\$83 - \$103
\$3,000	24 months	\$126	36	\$100 - \$125
\$3,500	24 months	\$147	36	\$117 - \$145
\$4,000	24 months	\$168	48	\$106 - \$140
\$4,500	24 months	\$189	48	\$119 - \$157
\$5,000	24 months	\$210	48	\$132 - \$175
\$6,000	24 months	\$252	48	\$158 - \$210
\$7,000	24 months	\$294	48	\$185 - \$244
\$8,000	24 months	\$336	48	\$211 - \$279
\$9,000	24 months	\$378	48	\$238 - \$314
\$10,000	24 months	\$420	48	\$264 - \$349
\$12,000	24 months	\$504	48	\$317 - \$419

Ask about 3 and 6 month plans for procedures from \$300 to \$999.

\* Payment amounts shown on the chart assume that the patient pays only the specified amount during the promotional period, with no late fees or other fees charged to the account. Payments required to fully pay off your balance(s) within the time frame allotted may vary due to your payment practices. For no interest plans, if the payments received are not sufficient to pay off the entire balance(s) during the promotional period, finance charges that accumulated during that period will be added to your account balance.



**Flexible, Affordable Financing Options:**

- No down payment required
- Payment plans to fit your budget
- A generous credit line for household use
- No pre-payment penalties

Plus, you can use your account at any ChaseHealthAdvance provider for any treatment, including dental, orthodontic, vision correction, hair restoration, cosmetic surgery and veterinary care.

Provider Merchant ID # \_\_\_\_\_

Treatment Fee \$ \_\_\_\_\_

Payment Plan \_\_\_\_\_

Estimated Minimum Monthly Payment \$ \_\_\_\_\_

*Important: Please read carefully.*

To apply, you must be at least 18 years of age (19 in NE, AL).

**In most cases, you will receive a credit decision in less than 15 minutes.** If we cannot approve you instantly, you will receive a call from us for clarification of application information inconsistencies or you will receive a letter in the mail from us regarding the credit decision within 7-10 days. Once your financing is approved, you have 90 days to schedule and begin treatment.

**Check with your doctor to see which plans they accept.** Not all doctors in the ChaseHealthAdvance program offer all of our financing plans.

**1. No Interest Payment Plans**

Purchase balance must be paid in full within the promotional period (3,6,12,18, or 24 months), all minimum payments must be made and account must not otherwise be in default during the promotional period or finance charges will be assessed on the balance due from the purchase date at the Annual Percentage Rate (APR) of 24.75% to 27.99% (depending on credit history at the time of credit approval). Length of the promotional period could be shorter depending upon the timing and amount of your payments and the type of other account balances.

**2. Extended Payment Plans**

Fixed payments are required each month throughout the specified extended financing period (24, 36, 48 months) until the balance is paid in full. Finance charges will be applied to the balance due at the Annual Percentage Rate (APR) of 11.99% to 27.99% (depending on credit history and the medical specialty of the practice at the time of account funding. Exact terms will be supplied to you prior to opening your account.)

**Applicable to all plans:**

**Default Rate:** Equal to the non-default APR for a particular plan, plus up to 10.00%, not to exceed an APR of 30.00%.

**Late Payment Fee:** \$39

**Returned Check Fee:** \$35

**Minimum Finance Charge, if assessed:** \$.50

*Additional details regarding promotional financing offers, payment allocation, minimum payment and default rules are contained in an account agreement*



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12,18,24 months 1199-ALL-10/08



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