

# FINANCIAL POLICY

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## FILING TO YOUR INSURANCE

Our primary goal is to assist you in receiving the quality dental care you need or desire. In our office, we strive to help you maximize your insurance benefits. Our fees are based on the quality materials we use and the time, effort and skill required in performing your needed treatment. We will assist you with your benefit eligibility in the form of a personalized treatment plan before services are rendered to help you estimate your costs and maximize your insurance. Ultimately, you are responsible for payment regardless of any insurance company's determination of usual and customary rates.

We are happy to assist you by submitting the claims necessary to see that you receive the full available benefits of your coverage. We cannot guarantee any estimated coverage. An insurance policy is a contract between the subscriber and the insurance company. Therefore, the patient is directly responsible for any charges that may not be covered under the guidelines of their policy. Please know that we will do everything possible to see that you receive the full benefits of your policy by electronically filing your claim. In addition, if there are any complications with the claims process, we will assist you by contacting the insurance company on your behalf with any additional information they may require.

## FORMS OF PAYMENT

Fees for services are **due at the time service** unless prior arrangements have been made. We accept the following forms of payment: Visa, MasterCard and Discover. We have also partnered with Care Credit in order to offer our patients options for deferred interest and extended payment plans. Checks that are returned to our office from your financial institution are subject to a \$25.00 returned check fee.

## RESCHEDULING/MISSED APPOINTMENT POLICY

Our practice is dedicated to quality care and exceptional service. Our doctors and team spend a large amount of time preparing for your visit. Broken or missed appointments create scheduling problems for our team as well as other patients. If you find that you must change your appointment, **we expect a minimum of 24 hrs notice** so that we may make every effort to accommodate other patients. If an appointment is missed or canceled with less than a 24 hour notice we **reserve** the right to charge you a short notice cancellation fee. *The cancellation fee for a short notice or no-show appointment is \$25.00 for each hour reserved, with the possibility of dismissal, after multiple short notice cancellations or reschedules.* These fees are not a covered expense by insurance.

## THANK YOU FOR READING & UNDERSTANDING OUR FINANCIAL POLICY

I have read and agree to the Financial Policy and the Cancellation Policy.

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*Signature of Patient or Responsible Party*

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*Date*

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