

OFFICE POLICY

We appreciate the opportunity to serve you! Please read the following carefully and ask any questions you may have. We will do our best to answer them for you.

Patients without insurance coverage: We offer a 5% discount after your initial visit. Payments for services are expected at the time of service and we do not offer payment plans or in house financing. Care Credit is a financing option endorsed by the American Dental Association that many people have found useful; go to www.carecredit.com and fill out the application.

Patients with insurance: Insurance is a contract between you and your insurance company; we do our best to **estimate** what insurance will cover based on the information provided to us. As a courtesy we will bill your insurance company. If insurance denies the claim for any reason, we will reprocess the claim up to three times. In the event your insurance denies coverage or pays less than estimated, you are ultimately responsible for all fees generated. If your insurance company has not paid your claim within ninety (90) days after the date of service, the full amount is due and payable by you. It is your responsibility to inform us of any changes in your insurance coverage; if your insurance changed and you don't let us know there will be a \$25 refiling fee.

We require at least 48 hours' notice to cancel, move or change appointments. A \$50 short cancelation/ no show fee will be applied to your account for rescheduling, canceling or failing to show up for your appointment. We will waive the fee once.

Past due accounts: In the unlikely event that your account becomes more than 90 days past due, you will receive a statement notifying you of the balanced owed. If the account remains unpaid your account maybe referred to a collection agency.

Returned checks: There is a \$50 service fee for any checks returned by the bank.

Divorce: The parent authorizing treatment for a child will be responsible for account charges. We do not get in the middle of divorce it's the parents' responsibility to know who's paying for treatment.

Treating minors: The responsible party is authorized to leave the building after anesthetic is given if needed, but we do advise you to stay in the building during restorative treatment in case of emergency.

Pre-med and other prescriptions: We do not call in prescriptions we will give you a paper copy of the prescription needed that you can take to your pharmacy and get filled.

Name of child(ren) if signing for minor(s): _____

Print Name: _____

Signature: _____