



FINANCIAL POLICY

IT IS OUR RESPONSIBILITY TO GIVE YOU A PRE-TREATMENT ESTIMATE. IT IS YOUR RESPONSIBILITY TO PAY FOR DENTAL SERVICES THE DAY THEY ARE DONE. We will accept cash, personal check, Visa Card or MasterCard. Other external financial options are available for those who desire a **payment plan**. An application is available from your doctor's patient coordinator, and credit approval can usually be obtained over the phone in less than one day. Once the financial arrangements and conditions of treatment are agreed upon, should it become necessary to place this account for collection, you agree to pay all costs and expenses thereof.

APPOINTMENTS: To keep the cost of dentistry as low as possible, appointments are scheduled to best fit the doctor's, the hygienist's and the patient's busy schedules. These **appointments are a contract of time reserved specifically for you**. A **48 business hour notice is needed and required** to reschedule your appointment to adequately allow time to help another patient. There will be a charge for any missed or rescheduled appointments with less than 48 business hour notice. **Please do not put us or yourself in this uncomfortable situation.**

FOR OUR INSURANCE PATIENTS

You have a direct relationship with your insurance company, most likely through your employer. You also have a direct relationship with your doctor. Your doctor does not have a relationship with your employer or your insurance company. Therefore, financial arrangements are made with you and not your insurance company. **YOU ARE TOTALLY RESPONSIBLE FOR YOUR ENTIRE DENTAL BILL.**

HOWEVER, we will quote fees, and from the information you give us we will ESTIMATE (**APPROXIMATE**) the amount your insurance company will most likely pay as covered benefits under the terms of your contract. If you have any questions about your treatment, the cost, or need help in determining your coverage, please call our office. Our staff is highly trained to help you. **Most plans do not pay for the entire cost of your care.** Do not proceed with treatment until you understand what is financially expected of you. It is your responsibility to be sure you are **eligible** for treatment when dental services are provided. There may be a deductible, a yearly maximum, a reduced fee table, or other limitations and/or excluded services. The most **frequent areas of misunderstandings** are clauses relating to "least adequate care provision" (only covering silver fillings in the back of the mouth instead of the newer, better, bonded white fillings), "general limitations" (non duplication of benefits with dual insurance, or no "prior extraction" coverage for bridges) and "pre-authorizations" (usually not required).

We will accept assignment of benefits. This means we will collect your estimated co-payment when treatment is rendered and process your initial claim. You are **authorizing** us to release all necessary **information** to your insurance company to secure the **payment of benefits, for which you are entitled, directly to the dental office.** **We will wait 90 days after your treatment for payment by your insurance company, after which it is your obligation to pay the entire amount due.** There will be a finance charge in the amount of 2% per month, or 24% annually, on any balance over 90 days.

We are **now successfully billing medical insurance** for medical problems best treated by us as dentists. We **do not accept assignment of benefits** as we do for dental insurance. You will be expected to pay for any treatment for which we bill medical and then you **may** be reimbursed by your medical insurance.

If your insurance company does not pay what you expected or would like, please remember that your **insurance company should not decide your dental health. YOU SHOULD!** In the event you do not receive the benefits from your insurance carrier which you believe you are entitled, contact your employer's benefits department, your insurance representative, your union agent or the State Attorney General's office.