

Insurance Policy

We would like to highlight a misconception that dental insurance was designed to pay 100% of dental care. That is not true. Dental insurance was designed to provide assistance in obtaining needed dental treatment and seldom pays 100%. Most contracts have limits and/or various degrees of co-payment.

All levels of payment by insurance companies, including allowed fees, usual and customary, are governed by your premiums paid to your actual insurance company. They have nothing to do with the actual charges. Our fees are based upon a combination of our costs, our time, and our constant dedication to supplying our patients with the highest quality of dental care. The treatment recommended by our office is never based on what your child's insurance company will pay. Your treatment will never be governed by the insurance contract; it will be based off of your child's individual needs.

It should also be understood that the dental insurance contract is between the insurance company and the patient, and that **THE PATIENT BEARS THE ULTIMATE FINANCIAL RESPONSIBILITY**. As a courtesy, we will file claims with insurance on your behalf. We do NOT sign contracts with insurance companies, therefore are always an out-of-network provider; however, there frequently are no in-network specialists within a reasonable distance. We recommend that you contact your insurance company, prior to appointment, to see what benefits are available for out-of-network providers.

Financial Policy

Payment is due at the time service is provided. We make every attempt to disclose all fees and make financial arrangements prior to treatment. Those arrangements include: cash, check, debit/credit card, and Care Credit.

Any balances determined as patient responsibility that remain unpaid after 60 days will begin to accrue finance charges. If still unpaid after 60 days, the account may be sent to an outside collection agency. In this event, you will be obligated to pay for any reasonable collection agency fees, court costs, and attorney fees should the collection proceedings advance to litigation.

Cancellation Policy

A broken appointment is a loss to three people.

- * The patient who missed the valuable time
- * Another patient who could have taken the valuable time
- * The doctor who was fully staffed and prepared for the appointment

We understand that "life happens", but we ask that you give us at least 48 hours notice if you need to cancel an appointment. If you provide us with less than 48 hours notice, fail the appointment without notice, or arrive more than 15 minutes late to a scheduled appointment-this is considered a broken appointment. If you have more than two broken appointments in a one year period, you will not be allowed to schedule a new appointment without a prepayment of \$75.00 to hold the appointment time. If you are a new patient and fail your appointment, or don't cancel at least 48 hours in advance, there will be a \$75.00 deposit due when scheduling future appointments. Upon arrival of your agreed scheduled appointment time, the \$75.00 deposit will go towards any cost accrued at that appointment. FAILURE TO \$HOW for your appointment time will result in a LO\$\$ OF YOUR DEPOSIT.

ACKNOWLEDGEMENT OF RECEIPT OF OFFICE POLICIES

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