



**OUR FINANCIAL POLICY**

We are committed to providing you with the best possible care. If you have dental insurance, we are anxious to help you receive your maximum benefits. In order to achieve these goals, we need your assistance, and your understanding of our payment policy.

Payment for services is due at the time services are rendered. We accept cash, checks, MasterCard, Visa, American Express and Discover. Financing is available with approved credit. Ask for details.

A minimum charge of \$30.00 will be made for broken appointments and appointments cancelled without 24 hours notice. Our fee for returned checks is \$25.00.

We do not send monthly statements. Therefore, for any balance remaining after insurance has paid you will receive one statement which is due immediately and in full. Any delinquent balance is subject to interest and will be given to a collection agency after 30 days.

**OUR INSURANCE POLICY**

We will gladly discuss the cost of treatment and answer any questions relating to your insurance, realizing that:

**INSURANCE CONTRACT:** Your insurance is a contract between you, your employer and the insurance company. We are not a party to that contract.

**“U.C.R.”:** Most insurance companies pay based on “U.C.R.”, which is the arbitrary amount allowed by your policy for each covered procedure. If your coverage is based on a fee schedule it is necessary for you to provide us with a copy of such schedule. We are not contracted with any insurance company as a preferred provider and do not adjust our fees according to what insurance does or does not pay. You are responsible for all amounts not covered by insurance.

**ARBITRARY EXCLUSIONS:** We diagnose and perform treatment based on *dental necessity* not insurance coverage. Not all services are a covered benefit in all contracts. Some insurance companies arbitrarily select certain services they will not cover. We will be happy to help you process your insurance claim form and, in most cases, accept assignment, if all necessary information is provided prior to the appointment. If you are "double covered" we must disclose that information to your primary carrier, however we do NOT accept assignment on secondary coverage. It will be your responsibility to pay your deductible and estimated percentage not covered by insurance at the time services are rendered. We base our *estimated* out of pocket amounts on our experience with many different coverages over the last several months. We do not use amalgam (silver) filling material. For bonding-type composite fillings done on posterior teeth your estimated portion will be approximately 50% of our fee. Most policies have procedures that are not covered. In order to get a more accurate estimate of what insurance will pay, a pre-treatment estimate will be necessary. However, response time is usually very slow (6 weeks or longer). In many cases the postponement of dental treatment may be detrimental. Therefore, we do not usually suggest waiting for the pre-treatment estimate.

**OUR DENTAL RECORD POLICY**

In the event another provider of dental service needs to view our radiographic records, duplicates are made and usually sent directly to the provider. In some cases, there is a fee associated with the duplicating of films.

We must emphasize that as dental care providers, our relationship is with you, NOT your insurance company. While the filing of insurance claims is a courtesy that we extend to our patients, all charges are YOUR responsibility from the date the services are rendered. A copy of this policy is available for your records upon request.

\_\_\_\_\_  
Signature (Responsible party)

\_\_\_\_\_  
Date