

## Financial Policy

### Welcome

Thank you for choosing us as your dental provider. We are committed to providing you with the best possible dental care. Your clear understanding of our practice financial policy is important to our professional relationship. We make every effort to keep our fees reasonable while at the same time covering the cost of the services we provide. Payment of your bill is considered part of your overall treatment. In order to keep the dental care costs to an absolute minimum, we have adopted the following policies.

### Fees and Payment

Insurance estimated portions are due at the time of service. If you are unable to pay your estimated portion at the time of your visit, your appointment may need to be rescheduled. You are also responsible for the difference in cost between an amalgam (silver) and a tooth-colored filling because the insurance typically does not cover the cost of tooth-colored fillings. While filing insurance claims is a courtesy that we extend to all of our patients, all charges are your responsibility from the date services are rendered. Your insurance is a contract between you, your employer and the insurance company, we are not party to that contract. Before your visit, contact your insurance company to verify that we are participants in your plan, and that the services you intend to receive are covered. In order for us to file a claim, you must present a **CURRENT** copy of your insurance at each visit and communicate any changes in your personal information.

Not all services are a covered benefit in all policies, so it is very important that you understand the provisions of your individual policy. Insurance companies select certain services that they will not cover, therefore we cannot guarantee payment of all claims by your insurance company. In general most preventive services are covered at a high percentage by the insurance companies. These services include x-rays, examinations, cleanings, fluoride treatments for children and sealants. These items are necessary for maintaining optimal dental health and ruling out possible abnormalities. All x-rays will be taken at the time of your visit for proper diagnosis unless you bring copies of recent x-rays. The insurance coverage will not dictate your optimal dental treatment for your oral health. Reduction or rejection of your claim does not relieve you of your financial responsibility. Finance charges will accrue on all past due accounts after 90 days.

I have read and understand this consent agreement.

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Signed

\_\_\_\_\_  
Date