

Our Financial Alliance

Our Philosophy

Our goal in discussing financial arrangements with you is straightforward:

To create an understanding and partnership in the settlement of your account.

It is important to us that the quality of our business services matches the quality of our dentistry. We want the handling of your account, from the start through final payments to be perceived as an extension of the dental care we provide you and your family.

Patient's Role

As with any partnership, both parties have a role to play. Our role is to provide you with quality service. In turn, your role is to pay for your treatment in a timely manner. Our staff will work with you to determine financial arrangements that make sense for both you and our office. With an agreement made, our joint follow-through will result in a win for everyone.

In developing a financial agreement, it is important to remember your dental future. Our experience has shown that when an account lingers, patients are likely to defer their appointments. It is discouraging to add new charges to the account when tiring to pay off old charges. With this in mind, we will concentrate our efforts on clearing your account in as short a time as is comfortable for both of us.

All patients must complete our Information and Insurance Form before seeing the doctor.

**FULL PAYMENT IS DUE AT TIME OF SERVICE
WE ACCEPT CASH, CHECKS, MASTERCARD, VISA & AMERICAN EXPRESS
WE OFFER ACCESS TO EXTENDED PAYMENT PLANS WITH CREDIT APPROVAL**

Cancellation Policy

We would like to take an opportunity to remind you that we reserve time especially for your dental care. By scheduling an appointment for you and/or your children, you understand that the appointment is subject to the current cancellation fee which is available upon request. We ask that our patients give us 24 hours' notice if they need to change or cannot keep an appointment.

Regarding insurance

We may accept assignment of insurance benefits, however the balance is your responsibility whether your insurance company pays or not. We cannot bill your insurance company unless you give us complete insurance information. Your insurance policy is a contract between you and the insurance company. We are not a party to that contract. If your insurance company has not paid on a claim within 45 days, the full balance will automatically be transferred to you. That balance will be due upon billing.

As a part of the financial arrangement process, we will **ESTIMATE** what your insurance company will pay. We require payment of your uninsured portion upon receipt of services. In the event that your insurance company denies payment of service, you are responsible for that fee. Any unpaid balance after insurance pays is due within **14** days.

Thank you for understanding our Financial Alliance. Please let us know if you have any questions or concerns.

I have read the Financial Alliance. I understand, accept, and agree to this Alliance.

Signature of Patient or Responsible Party

Date