

## FINANCIAL POLICY

The following is a statement of Our Financial Policy, which we ask that you read and sign prior to treatment. All patients must complete our Information and Insurance forms before seeing the doctor.

WE ACCEPT CASH, CHECKS, DEBIT, OR VISA, MASTERCARD

### Regarding Insurance

The balance is your responsibility whether your insurance pays or not. We cannot bill your insurance company unless you give us your complete insurance information. Your insurance policy is a contract between you and your insurance company. We are not a party to that contract. Please understand there are many different insurance plans. As a courtesy to you our staff spends a great deal of time getting information and benefits. We do the best we can with the information the insurance gives us. This is not a guarantee of payment. Payment is determined at the time the claim is received by the insurance company. If your insurance company has not paid your account in full within 30 days, the balance will be automatically your responsibility. Please be aware that some and perhaps all, of the services provided may be non-covered services and not considered reasonable and necessary by your insurance.

All co-pays and deductibles are due at the time of service. In the event that your insurance coverage changes our office must be notified at least 2 business days prior to the appointment to insure proper verification. If for some reason we are not notified in advance you will be responsible for 100% of the charges accrued.

### Usual and Customary

Our practice is committed to providing the best treatment for our patients and we charge our usual and customary fees to all our patients. You are responsible for payment regardless of any insurance company's arbitrary determination of usual and customary rates. Your policy may base its allowances on a fixed fee schedule, which may or may not coincide with our office is far above those guidelines.

The adult accompanying a minor and the parents ( or guardians) are responsible for full payment.

### Missed Appointments

A notice of 24 hours in advance is required for unkept appointment. A dental charge could be incurred if no notice is given in advance. Please help us serve you better by keeping scheduled appointments.

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Parent or Guardian

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Date